

**The Experience of Aboriginal Nursing Students with the  
Native Access Program to Nursing  
in the Nursing Education Program of Saskatchewan**

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in Partial Fulfillment of the Requirements  
for the Degree of Master of Nursing  
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by

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## **Abstract**

The ability of nursing and the health care system to respond appropriately to the needs of an increasingly racially diverse population requires an increasingly diverse workforce. Efforts to increase the diversity of nurses in nursing schools across Canada and the United States have been less than successful.

The Native Access Program to Nursing (NAPN) is a support and advocacy program geared towards recruitment and retention of Aboriginal nursing students in the Nursing Education Program in the province of Saskatchewan. This study examined the experiences of Aboriginal nursing students with NAPN in order to ascertain the students' perceptions of the program's effectiveness.

Twelve nursing students and recent graduates were interviewed about their experiences with the NAPN. The researcher spoke with three students from each of the four years of the program, allowing for different perspectives based on experience in the nursing program and with NAPN. Student participant comments were examined for evidence of the nature and extent of the support that NAPN provides to the students.

Results show that the students were very satisfied with NAPN, its staff, and programs. Elements of the program that had special meaning for the students were discussed in greater detail. Cultural aspects, accessibility to NAPN services, flexibility of service, and staff attitude were the qualities that the students identified as being most helpful in NAPN.

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## **1.0 The Study Problem**

### **1.1 Introduction to the Problem**

“The history of post secondary education for Aboriginal peoples in Canada is recent. Not so long ago pursuing education beyond grade 8 meant losing one’s Indian status. Only since the 1970s has specific attention been paid to the needs of Aboriginal people in higher education” (Richardson & Blanchet-Cohen, 2000, p. 169). There has been little research exploring the educational experiences of Aboriginal students in nursing programs. This study examined the experiences of Aboriginal nursing students with the Native Access Program to Nursing (NAPN), a program designed to enhance the retention of Aboriginal nursing students in the Nursing Education Program of Saskatchewan (NEPS).

Nationally, approximately 4.4% of all Canadians have Aboriginal ancestry (Indian and Northern Affairs Canada, 1997a). In 1997, the Department of Indian and Northern Affairs identified that approximately 14% of people in Saskatchewan were of Aboriginal ancestry. The Federation of Saskatchewan Indian Nations (1997) has estimated that the Aboriginal population in this province will constitute 31% of the labour force based on age, by the year 2045.

The ability of nursing and the health care system to respond appropriately to the needs of an increasingly racially diverse population requires an increasingly diverse workforce. In the area of healthcare, minority populations traditionally have been underserved (Cole & Stutte, 1998). Nurses comprise the largest number of health



care providers and the inclusion of minority nurses would assist in the understanding and articulation of the health care needs, culture, and care of minority patients (Heller, Oros, & Durney-Crowley, 2000; Yurkovich, 2001). In describing the role of Aboriginal nurses in the community, a survey reported that First Nations nurses “bring knowledge of the language and culture, which is invaluable in working with and understanding clients and the community relationships and practices” (Aboriginal Nurses of Canada [ANAC], 2000, p. 32).

Of the visible minorities, Aboriginal people constitute one of the smallest groups in nursing (Buerhaus & Auerbach, 1999; Crow, 1993; Plumbo, 1995; Yurkovich, 2001). According to the 1996 Nursing Datasource Research Report, Native Americans are the least represented of all minority groups, including men, in nursing education programs in the United States (National League of Nursing, 1996). In Canada, the Royal Commission on Aboriginal Peoples (RCAP, 1996) stated that as of 1983, less than one percent of health professionals were of Aboriginal ancestry; this number included physicians, pharmacists, dentists, physical therapists, and nurses. An earlier report from this commission stated, “only about 0.1 per cent of registered nurses in Canada are Aboriginal” (1993, p.4).

Many reasons have been suggested for the low numbers of minority students in nursing education programs. Reasons include discrimination, restricted admission guidelines, socioeconomic factors, alienation, institutional racism, poor academic preparation, and the low numbers of minority faculty (Barbee & Gibson, 2001;

Boyle, 1986; Cole & Stutte, 1998; Crow, 1993; Dickerson, Neary & Hyche-Johnson, 2000; Kulig & Thorpe, 1996; Morris & Wykle, 1994; Snyder & Bunkers, 1994; Yurkovich, 2001).

The current nursing shortage in Canada and the United States has had a positive impact on strategies to increase recruitment and retention of minority students into nursing. However, minority students have been labeled 'high risk' and continue to experience greater attrition rates than Euro-Canadian students in nursing education programs (Boyle, 1986; Dowell, 1996; Snyder & Bunkers, 1994). While there is little data on the attrition rates of Aboriginal nursing students in Canada, Richardson and Blanchet-Cohen (2000) state, "Of those Aboriginal students who begin university studies about a quarter earn a degree compared with about half of non-Aboriginal students" (p. 182).

Some of the issues raised in the literature that may create obstacles for Aboriginal students include housing, health problems, university indifference, lack of faculty support, need for child care, single parenthood, racism, lack of tutorial support, financial problems, cultural differences, being a non-traditional student, and distance from community (Baptiste, 1994; Huffman, 1991; Lowe, 2002; Manifold & Rambur, 2001; Morton, Boone & Poole, 1997; Tate & Schwartz, 1993; Wood & Chwedyk, 2001; Yurkovich, 2001).

The National Native Access Program to Nursing (NNAPN) was established in 1986 as a response to concerns regarding the recruitment and retention of Aboriginal students in the baccalaureate nursing program in the College of Nursing

at the University of Saskatchewan (McLean & O'Brien, 1988). NNAPN was developed as a joint program sponsored by the College of Nursing, University of Saskatchewan, and the Saskatchewan Indian Federated College, University of Regina. Initial funding was provided through an agreement with Medical Services Branch (MSB) of Health Canada.

The original program promoted nursing to Aboriginal people nation-wide, negotiated access seats for Aboriginal students with all Canadian universities, and offered a nine-week Spring Orientation program that was meant to prepare Aboriginal students for the demands of campus life and the nursing program. In 1992, responsibility of the program changed from a national to a provincial scope and it became the 'Native Access Program to Nursing' (NAPN). This change was due, in part, to financial restraints imposed by funding cutbacks from MSB. The program shifted from a focus on a nine-week preparation format to a support program that ran throughout the school year. The revised program focused its efforts on providing support and advocacy to retain Aboriginal students enrolled in nursing education at the University of Saskatchewan.

In 1996, the Saskatchewan Institute of Applied Science and Technology (SIAST) and the College of Nursing at the University of Saskatchewan created the Nursing Education Program of Saskatchewan (NEPS). This program is a collaborative four-year degree program in nursing that is offered on two sites in Saskatoon and one in Regina. Students currently take NEPS classes at SIAST in Year One and Two, and move to the University site for Year Three and Four.

NAPN now provides support and programs for students in Years One through Four at both SIAST and the College of Nursing sites in Saskatoon. NAPN has secured funding to expand the program to include all four years at the Regina site, and in late 2001, hired an Advisor full-time for this site. In their 1999 - 2000 Annual Report, NAPN identified 45 students registered in the NEPS program (NAPN, 2000). By 2002, this number had increased to 75 students at the Saskatoon and Regina sites according to V. Arnault, NAPN Student Advisor (personal communication, October 16, 2002).

In June of 2000, NAPN staff held a two-day retreat with its Advisory Committee to examine the program's mandate, mission, vision and goals. The mission statement is: Success and excellence for Aboriginal nursing students. The vision statement became: By maximizing human, financial and cultural resources and incorporating underlying values, NAPN provides student support and creates community liaisons to promote the advancement of Aboriginal nursing (Roberts, 2001). Following this retreat, NAPN staff and the Advisory Committee examined the possibility of having the program evaluated (Roberts, 2001). This study constitutes a portion of the recommended program review, addressing the experiences of students with NAPN.

## **1.2 Definitions**

For the purposes of this paper, the term Aboriginal will be used to refer to anyone of Aboriginal ancestry. I do not want to give the false impression that

utilizing one term means that Aboriginal people are in any way one homogenous group. Thus, a brief overview of terminology and history may be helpful in illustrating the diversity of Aboriginal peoples.

Aboriginal people in Canada live in scattered, often remote communities. They are divided by language and cultural differences, geographical boundaries, and legal distinctions. In Saskatchewan, there are three known language groups. The first, the Siouan, includes the Sioux and the Assiniboine. The second is the Athabaskan or Dene. The third group is the Algonkian that has three sub-groups of Cree and includes Saulteaux.

The Canadian government has divided the First Nations in Saskatchewan into seven districts for administrative purposes. Each district contains from 1 to 18 reserves. Approximately 65% of the First Nations people in Canada live in rural areas, while in Saskatchewan, this percentage is approximately 34% (Federation of Saskatchewan Indian Nations, [FSIN], 1997). This same report indicates that in 1992, 93,442 first Nations people lived in Saskatchewan (p. 40).

Another group of Aboriginal people is Inuit, inhabitants of the Arctic territories. As of 1991, there were approximately 540 Inuit in Saskatchewan (FSIN, 1997). Metis are a "post-contact phenomenon" and are descendants of northern Aboriginal and European cultures, most notably, French (Waldram, Herring, & Young, 1995, p. 10). In 1995, there were approximately 42,042 Metis people in Saskatchewan (FSIN).

The term 'Indian', which has long been the common term to refer to Aboriginal peoples, is now considered a "misnomer" (Indian and Northern Affairs Canada, 1997b, p.5). However, there are legal definitions that must be mentioned as these terms will come up in further discussion, that contain the word Indian. The terms 'status' or 'registered' Indian refers to those persons whom the federal government recognizes to be 'Indians' under the Indian Act. The Indian Act was enacted in 1876 to facilitate the assimilation of Indian people into mainstream Canada and to guide the management of the various programs set up for Indian people. The Indian Act defined who could be considered an Indian. Another term is 'treaty' Indian and this refers to those individuals whose ancestors were present at a treaty signing. Treaty Indians are always status or registered, but a person can be status or registered but not be treaty (Waldram, Herring & Young, 1995). While there is no legal definition of the term 'First Nations', many Aboriginal people prefer this term. However, as stated earlier, this paper will use the term "Aboriginal" to refer to all peoples of indigenous ancestry.

### **1.3 Purpose of the Study**

The purpose of this descriptive, qualitative study is to explore the perceptions of the effectiveness of the student services offered by NAPN, as described by the Aboriginal students in the Nursing Education Program of Saskatchewan, College of Nursing and SIAST.

Does the Native Access Program to Nursing meet the needs of Aboriginal nursing students who are taking the nursing education program within the College of Nursing and SIAST? These four main goals of NAPN are: 1} Student support is essential for success, 2} Creative use of resources is essential for sustainability and excellence, 3} underlying values / beliefs provide guidance and direction and, 4} strong liaisons with communities are essential for success. Goals 1,2 and 4 have sub-goals, which will be discussed, in a later section of this paper (Roberts, 2001).

#### **1.4 Need for the Study**

The last formal evaluation of NAPN was conducted in 1990 – 1991, while the program was a 9-week spring orientation program. The final report was completed in February of 1992. The research and evaluation report was funded by Medical Services Branch of Health Canada. The report found that “The favourable student response their experience at NNAPN is overwhelming. If NNAPN’s success is measured by student response, the program can be considered very successful” (Kaweionnehta Human Resource Group, 1992, p. vi). However, as mentioned earlier, the decision was made to change the national format of the program to a regional design that also focused on retention of Aboriginal nursing students.

There is considerable interest in the evaluation of NAPN, especially since the change in mandate that made NAPN a support and advocacy program instead of an access program. Increasing awareness of barriers faced by Aboriginal students in this nursing program may provide suggestions for implementing changes in NAPN

to address these issues. Similarly, identification of facilitating factors may allow this nursing program to expand, promote, or enhance these areas to improve the retention of Aboriginal nursing students, and to identify and describe a model for other disciplines.

This study may provide the basis for extending cross-cultural curricula and improving the recruitment and retention of other minority students into nursing. Due to the scarcity of literature on Aboriginal or Native American nurses, there is an obvious need for further exploration and development of knowledge in this area.



## **2.0 Evolution of the Study**

### **2.1 Conceptual Framework**

This qualitative study utilizes a naturalistic approach to data collection and analysis (Morse & Richards, 2002; Polit & Hungler, 1999). Use of a qualitative descriptive method of inquiry precludes the use of a conceptual framework. Descriptions of the experiences as lived and related by the Aboriginal nursing students will be accepted as offered and will not be modified to fit a preconceived definition or theoretical framework.

It was hoped that use of a qualitative approach would provide an opportunity to gain an understanding of changing perspectives, as the students interviewed were in different years of the program. The data collected was examined for evidence of a process of adaptation or adjustment that may occur as the students progress from one year to the next.

### **2.2 Literature Review**

Some sources suggest leaving the literature review for qualitative studies until all the data is collected (Cobb & Hagemaster, 1987; Oiler, 1982). According to Cobb and Hagemaster, “this assures that the study is truly grounded in the data” (p. 140). However, Sandelowski, Davis and Harris (1989) state, “in naturalistic inquiry

the literature review process opens investigators up to the complexity of a phenomenon, rather than funneling them toward an *a priori* conceptualization of the phenomenon and how it should be measured” (p. 78). In this study, integration of the literature and the findings of the study were completed upon analysis of the data.

The initial literature search was accomplished utilizing the Medline (Medical literature on line), CINAHL (Cumulative Index to Nursing and allied health literature), and Psylit (Psychology literature) computerized databases. Search terms included, but were not limited to; nurse(s), Native American, Aboriginal, retention and recruitment, barriers and facilitators, nursing education, nursing students, and student support programs. Due to a lack of literature in these areas, I broadened the subject search to include other minority nurses.

Within this larger framework, there was some literature available on minority nurses and the issues of recruitment and retention. However, most of this work originated in the United States and tended to focus on African-American nurses, probably because these nurses represent the largest percentage of visible minorities in nursing in the United States (Morris & Wykle, 1994). There was also a tendency to focus on faculty and their responses to minority nurses (Campbell & Davis, 1996; Courage & Godbey, 1992; Dickerson & Neary, 1999; Kulig & Thorpe, 1996).

I located five studies that dealt specifically with Native American or Aboriginal nurses in Canada. One was conducted as a survey (Nowgesic, 1990), and reports little experiential information. Nowgesic, working with the Indian and Inuit Nurses of Canada [IINC], carried out this survey in order to ascertain the number of

Native nursing students and identify Native nurses and non-Native nurses who work in Native communities. The target population was selected using IINC records, Canadian Schools of Nursing, and Medical Services employee records. IINC sent out 1500 questionnaires with a return of 205, a response rate of 14%. Of the returned questionnaires, 49 were from Native nursing students, 57 were from Native nurses, and 99 were from non-Native nurses.

One of the conclusions reached by Nowgesic (1990) was that the results of the survey were not accurate as the researcher felt that a significant portion of the target population was missed. A follow-up report was published in 1991 (IINC, 1991) that provided further analysis of the information collected in 1990. In summary, the findings demonstrated that there were more non-Native nurses than Native nurses working in Native communities. There was a very poor response rate to the questionnaire from the eastern provinces, which may skew the data. Thus, a large proportion of those who returned survey questionnaires were from the western provinces.

A second study conducted in Canada by Kulig and Thorpe (1996) included four Aboriginal nursing students. It should be noted that this study did not focus exclusively on Aboriginal students, but rather on culturally diverse Post-RN students. The purpose of the study was to “explore the individual perceptions of students regarding the teaching learning environment with a view to gaining insights into the influence of cultural backgrounds on student learning and success” (p. 120).

This study also lacked detail in the manner in which the study was reported. For example, the report states, “The sample comprised four aboriginal persons, two Japanese, two Canadians, one French, one Greek, one Jamaican, and one Bahamian” (Kulig & Thorpe, 1996, p. 120). There is no definition given for who is Canadian and why the Aboriginal persons were not considered Canadian.

Kulig and Thorpe (1996) reported three major themes that emerged from the data collected: 1) issues with teaching learning styles, 2) the importance of role models, and 3) valuing cultural identities. Their recommendations centered around these themes. For example, they suggest the use of guest speakers of varying ages and cultural backgrounds to enhance the teaching environment.

Katt (1995) conducted the third study in a project at Lakehead University, entitled ‘The Medicine Wheel View of Retention: A study of First Nation Baccalaureate Nursing graduates’. This study explored the experiences of four Aboriginal nursing students who successfully graduated from a baccalaureate-nursing program, and attempted to identify those factors that allowed them to persist to completion of the program. Katt utilized the ‘medicine wheel’ as her conceptual framework. The medicine wheel is represented as a circle, an important symbol for many Aboriginal people in Canada and the United States. The medicine wheel also provides visual representation of the “four aspects of human nature: physical, intellectual (mental), emotional and spiritual” (Katt, 1995, p.5).

In order for Katt to utilize the medicine wheel as the conceptual framework, it was necessary for her to interview nurses from areas where cultural cohesion was

evident. This enabled the researcher to apply the medicine wheel concept, as the participants would share a common understanding of their culture. All four of her participants, including the researcher, had the same tribal affiliation in Ontario and shared some common values and traditional teachings.

Katt (1995) utilized an interview guide that focused on each of the four domains of the medicine wheel as identified earlier. One of the conclusions drawn by the author stated:

By identifying a student's source of motivation, the institution and faculty can provide the necessary support programs and counselors to assist the student. Since reinforcement of cultural values is important to the students, both the content of nursing education and the social environment should contain positive elements that nurture the cultural values, beliefs and customs of the students (p. 46).

Katt also acknowledged the importance of family support in the success of the students in completing the nursing program. Katt included suggestions regarding the involvement of family in the selection interview process before entering into university, encouraging family participation in on-campus activities, and education of faculty in the importance of family roles and responsibilities that non-traditional students have (1995, p. 50).

Acceptance of cultural differences remains the largest challenge for students. Feeling that their cultural identity is not readily accepted leads to low self-esteem. Although curriculum can encourage understanding and

acceptance, the ethnocentrism of the profession still pervades. (Katt, 1995, p.50).

Katt suggests increasing the content of First Nations culture and health issues in the curriculum, which would increase the understanding, and awareness of non-First Nations students.

Another study that focused on Aboriginal nursing students was also conducted at Lakehead University in Ontario. This project was called: "Attrition: Failure or Future, the experience of Aboriginal nursing students" (Morton et al., 1997). While Katt (1995) focused on 'persisters' or those students who completed their nursing education, Morton et al. focused on promoting an understanding of attrition among Aboriginal nursing students.

Morton et al. (1997) examined the Native Nurses Entry Program at Lakehead University and proposed to identify those factors, which contributed to the attrition of Aboriginal students from this program. The sample consisted of 10 Aboriginal women who had left the nursing program. They were interviewed using qualitative methodology and open ended questions. Interviews were undertaken by one researcher and were conducted by telephone, tape recorded, and then transcribed for later analysis. The researcher had no prior contact with the participants.

One of the conclusions drawn by the authors stated: "The reasons for attrition can be internal to the program such as criteria for admission or academic rigor for baccalaureate preparation or they may be external to the program such as community

prejudice or lifestyle factors” (Morton et al, 1997, p. 149). Morton et al also had two groupings of recommendations for future program planning, based on this study. The first group addressed issues related to academic preparation and performance of students. For example, the authors felt that entrance criteria to the program should be revised with a stronger emphasis on academic background. The second group related to “the context in which students study” (Morton et al, 1997, p. 149). For example, the authors recommend that issues of prejudice towards First Nations students be addressed.

A fifth study by Leslie (1998) was conducted in the College of Nursing at the University of Saskatchewan in Saskatoon. She examined the experiences of Aboriginal students in the University of Saskatchewan’s 1990 curriculum baccalaureate nursing program. Leslie utilized a phenomenological approach to interview five Aboriginal students and three recent Aboriginal graduates of the program. Leslie identified three factors that influenced the learning experiences of the students. These three factors were listed as; 1) relationship with families, classmates, teachers, 2) certain aspects of the teaching learning process, and 3) some difficulties arising from being a University student, specifically a nursing student (Leslie, p. ii).

Leslie (1998) identified recommendations for the College of Nursing, for teachers of Aboriginal nursing students, and for teachers of first year Aboriginal nursing students. Examples of the recommendations include increasing the Aboriginal content in the nursing curriculum, avoiding drawing attention to

Aboriginal students in the classroom, and acknowledging that some cultural adaptation to university and nursing is required for all students in the first year. She stated:

To date, students have largely been expected to change and adapt to meet the requirements of the university and the field for which they are being trained. Ideally, educational institutions which are 'student friendly' and teachers who are student-focused will begin to meet the increasing diversity of the current student body, which includes Aboriginal students" (Leslie, 1998, p. 77).

Possible limitations of this study included the non-Aboriginal researcher. Leslie (1998) acknowledged this limitation but stated that this may have been to her advantage. However, an awareness of the relationship between non-Native and Native people in the country would caution us to treat this statement with skepticism. "The scars of colonization have affected each generation of our people" (Royal Commission on Aboriginal Peoples, 1993, p. 172).

Leslie (1998) described efforts to maintain a level of trustworthiness in the results of the study. She also raised the question regarding the presence of the National Native Access Program to Nursing (NNAPN), as it was known at the time, as a unique variable. There were several positive comments regarding the role this program played in the success of the students in their completion of the nursing course. "Those who found NNAPN to be 'very important' said it offered them



needed comfort and support” (Leslie, p. 49). Some of Leslie’s findings will be discussed further, in a section entitled earlier research.

In summary, few studies address the experiences of Aboriginal students in nursing programs or in support programs within nursing education. Plumbo (1995) described the conflict between traditional Aboriginal values and modern western values as a “walking in two worlds phenomenon” (p. 158). It is this aspect of nursing and the interface with Aboriginal people and culture that I find fascinating. I feel that this ‘interface’ is evident for Aboriginal students in the NEPS program. This is part of the compulsion I feel to study the barriers and facilitators to Aboriginal student completion of a nursing program by accessing the voices of these students. Through this project, I hope to clarify those aspects of this particular support program that are successful, and those that may not be as successful.

### **2.3 Research Question**

This study examines the perceptions of Aboriginal nursing students in the Nursing Education Program of Saskatchewan regarding the services of and access to NAPN.

The objectives were:

1. To describe the experiences of Aboriginal students in the nursing program related to NAPN.
2. To identify facilitators and barriers to completion of nursing education.

3. To identify aspects of the NAPN that were helpful.
4. To identify aspects of the NAPN that were less helpful.
5. To identify services that NAPN does not offer but that the students believed were necessary or useful.

### **3.0 Design of the Study**

#### **3.1 Design**

This qualitative research design followed a naturalistic approach to data collection and analysis. “Qualitative design is flexible and elastic, capable of adjusting to what is being learned during the course of data collection. Qualitative design typically involves merging together of various methodologies” (Polit & Hungler, 1999, p. 239). The objective of this approach is identification of and promotion of the understanding of the experiences of human beings, wherever they are.

Polit and Hungler also state that, “The purpose of descriptive studies is to observe, describe, and document aspects of a situation as it naturally occurs” (p. 196). Thus, this approach to research allows the researcher to look at the experiences of people and the social world in which they live, from the viewpoint of the participant. It is a process concerned with discovery and description. Its goal is, simply, to describe the informant’s experience without changing it in any way.

In this type of inquiry, the source of data collection is subjective, consisting of interviews, conversations, or stories. The researcher attempts to assist the participants to describe their experiences (Seidman, 1998). Polit and Hungler (1999) identified four steps in one kind of qualitative study as: bracketing, intuiting, analyzing, and describing. “Bracketing refers to the process of identifying and holding in abeyance any preconceived beliefs and opinions one might have about the

phenomena under investigation” (Polit & Hungler, p. 247). The idea is to look at the data in its pure form. Intuiting refers to the process whereby “the researcher remains open to the meanings attributed to the phenomenon by those who have experienced them” (p. 247). This process results in a common understanding of the data.

Analysis refers to the coding, and categorizing of themes in the data. Description comes when the researcher attempts to understand, define, and present the phenomenon of interest. The desired outcome is for the researcher to be able to describe the phenomenon in a clear, distinct, and critical manner.

### **3.2 Setting**

NAPN is situated within the College of Nursing at the University of Saskatchewan, which is located in the city of Saskatoon, Saskatchewan. Saskatoon is positioned on the South Saskatchewan River in the south of the province. It covers approximately 144 square kilometers and is the largest city in Saskatchewan. The residents of the city number 222,635 with an Aboriginal population of approximately 20,275 (Stats Canada, 2001).

The University is a major centre for education, research, and service. There are 15,604 regular session students and approximately 3880 part-time students. As of February 2001, it was noted that Aboriginal student enrollment by self-identification exceeded 1000, so at least 5% of the student enrollment at the U of S is of Aboriginal background. The Native Access Program to Nursing was

developed to work with nursing students at the University of Saskatchewan. NAPN presently works out of two locations in Saskatoon, one at the College of Nursing at the U of S, and the second at SIAST, Kelsey campus. Recently an Aboriginal student advisor has been hired for the Wascana Campus in Regina, allowing NAPN to have a consistent presence in all three sites of the NEPS program. The nursing program that is offered at all three sites is the NEPS.

Currently, there are two student advisors in NAPN in Saskatoon. One is a Registered Nurse (RN) and the second advisor has an administrative and counselling background. As of 2003, both advisors were full time and worked between the two offices at Kelsey and the College of Nursing. NAPN staff are employees of the University of Saskatchewan. Staff salaries are funded by Medical Services Branch, Indian and Inuit Health Careers, and are administered by the University. Previously, employees had worked without any personal benefits but negotiations with the University have rectified this situation.

Services offered by NAPN include tutoring, supplied by the RN staff member and others as required. At present, the program has hired a retired RN and a Physical Therapist for tutoring in Anatomy and Physiology. NAPN staff are also involved in various promotional activities since part of their mandate includes recruitment of students into nursing. For example, last year, they attended several career fairs and gave presentations to several high schools. They have spoken to several nursing classes regarding Aboriginal health, culture, and research. NAPN

staff have been involved in newspaper and radio interviews regarding the support program and the nursing program (NAPN, 2000).

In a support role, NAPN is available to students to access on a daily basis, Monday to Friday. Staff is on hand to offer one-to-one counselling or to offer assistance in problem solving. NAPN integrates aspects of traditional Aboriginal teachings and values into its program. For example, a cultural camp was held one year which allowed the students to interact with Elders in a setting outside of the university. Elder support is also available on request. Monthly lunches or gatherings are conducted to increase the opportunity for students to interact and meet other students from different years in the program.

Funding for NAPN is provided by Medical Services Branch on an annual basis. The core budget for a year is \$96,000. There are some additional funds available for student summer employment. Office space is provided by the University and SIAST. A lounge for NAPN students is also provided by the University of Saskatchewan, near the College of Nursing NAPN office. An office is available at the Wascana (Regina) site, which has been utilized with the arrival of the new Student Advisor in 2002.

NAPN operates with the direction of an Advisory Committee. At present, the committee consists of the Dean of the College of Nursing; University of Saskatchewan; the Dean of Nursing, SIAST; a representative from the Saskatchewan Registered Nurses Association; a representative from Health Canada, MSB; one of the Program Heads, NEPS –SIAST; and two Aboriginal nurses. *Ex-officio* members

include a former coordinator of the Program and the previous Dean of the College of Nursing. The composition of the committee has changed many times over the years. Other stakeholders attend meetings on an invitational basis.

At present, NEPS is offered only in Saskatoon and Regina. Thus, many Aboriginal people interested in becoming nurses must relocate to either of these cities. Those Aboriginal people from northern communities face a new cultural, social, and urban environment that poses challenges unrelated to campus life. For each class intake, NEPS has 19 'equity seats' reserved for Aboriginal students. In the September 2001 class, all of these seats were filled with Aboriginal students. In addition, the University of Saskatchewan and SIAST have entered into a partnership with Saskatchewan Federated Indian College (SIFC) to teach NEPS in Prince Albert, beginning in September 2003. Prince Albert is located 140 kilometers north of Saskatoon.

### **3.3 The Sample**

The study population consisted of those Saskatoon-based students of Aboriginal descent who may or may not have utilized the services offered by the NAPN. I received a letter of support from the Native Access Program to Nursing (Appendix A). After the study received ethical approval from the U of S Advisory Committee in Ethics in Human Research (Appendix B); the Research Committee, College of Nursing (Appendix C); and the Dean of Nursing, SIAST Kelsey Campus

(Appendix D); I was able to move to the recruitment phase. To this end, I obtained the contact list of all those students who self-identified as being Aboriginal supplied by NAPN. I sent letters of introduction (Appendix E) and Information Sheets {Appendix F} to all those students for whom I had addresses.

The contact list that I obtained had 54 names from SIAST Kelsey Campus and the University of Saskatchewan; these students had access to NAPN over the past five years. There were also 31 names of Aboriginal students from SIAST Wascana Campus in Regina. Since the Wascana site was new, I chose to eliminate the names from Wascana as their experience and access to NAPN would differ considerably from those students in Saskatoon where NAPN staff have been present for the past five years.

I was able to interview a purposive convenience sample of 12 students, three in Year One, three in Year Two, three in Year 3 /4, one in Year 4, and two recent graduates. Of the twelve participants in this study, seven were Treaty and five were of Metis descent. Some of the students had experience with Aboriginal culture, having grown up within an Aboriginal community. Other students had no experience with the culture, having been raised in an urban or non-Aboriginal community. Most of the group were in the 18 – 30 year age range, with one who was in the 30 – 40 year range. All but one of the participants were female. Ten of the participants were single, two were married, and two had children. Eight of the students had previous post-secondary educational experience before entering the nursing program.



In order to protect the confidentiality of the students, they have been given pseudonyms that are gender non-specific and these names were assigned randomly to the completed transcripts. These names, in no particular order, are Jamie, Terry, Pat, Jordan, Kelly, Alex, Kim, Stacey, Sandy, Lee, Bernie, and Dale. For the purposes of this study, feminine pronouns will be used throughout this report.

### **3.4 Researcher as Instrument**

In qualitative research, there has been mention of the 'researcher as instrument' (Polit & Hungler, 1999). This idea of the investigator as the primary instrument used in data collection that influences both collection and analysis is not new. Researchers record, as faithfully as possible, the phenomena they observe. However, because of this personal connection to the data and research process, it is incumbent on the investigator to look closely at factors of personal background and perceptions in order to decrease chance of error or bias in data collection and analysis.

At this point in my thesis, I would like to provide a brief description of my orientation to the subject of inquiry. I am an Aboriginal nurse, of Cree descent, from a reserve in North central Saskatchewan. I am a Registered Nurse, with over 25 years of acute care nursing experience. I did not have access to an advocacy and support program such as NAPN when I was completing my basic nursing program at Kelsey Institute in 1976. As perhaps the only Aboriginal student in the Diploma nursing program at that time, I experienced feelings of isolation and separation.

During the two years that I spent in this program, I was tempted to quit many, many times. If not for the support of my family and one friend in the nursing program, I probably would have become another statistic in attrition.

I certainly could have utilized a support program and I believe that NAPN has a positive role to play in the recruitment and retention of Aboriginal students into the nursing profession. Although it is with this perspective that I approached the study question, I tried to set this belief aside, in order that I would more carefully hear the words of my participants. I elicited both helpful and problematic aspects of NAPN as identified by the students, with the expectation that the program can be enhanced with this knowledge.

As indicated above, my close association with the subject matter required examination of my beliefs and viewpoints regarding my own nursing background and experience in my nursing program. Awareness of my perspective would prevent me, I hoped, from influencing the collection and analysis of the data. I am Aboriginal and I was raised on a reserve until I was 12 years of age, when my family relocated to Saskatoon. I am familiar with the phenomenon described by Plumbo (1995) of 'walking in two worlds.' As an RN, I live in an urban setting and work in a large western medical-based institution that is staffed primarily by non-Aboriginal people.

While I have been educated and am practicing in the dominant society, I still feel ties to my Aboriginal past and history. Conflicts arise when there is a discrepancy between what I believe and feel with what I must do in my role as RN,

or what is expected in hospital policy. One example is the use of eye contact in nursing practice. It was years before I was able to maintain eye contact with strangers, as I had been taught that this was impolite. Moreover, there are still days when I have to remind myself to do this, and I have been practicing nursing for a long time.

Some of the students who have attended NEPS may have met me during some of my meetings with NAPN. As an Aboriginal nurse, I have participated in some of the activities organized by NAPN. For example, on February 9, 2001, I attended "Sharing the Circle." This event brought Aboriginal nurses together with some of the Aboriginal nursing students, to share stories about our experiences in nursing. I am hopeful that this connection with NAPN promoted the development of a trusting relationship with the students. I am aware that it may appear that I am biased in favour of NAPN, and I have endeavored not to influence the stories that the students wanted to tell.

The participants supported credibility in the research as transcripts of the interview were made available to the participants to read and make changes as deemed appropriate or desired. They were asked to sign a transcript release form (Appendix I) when they were satisfied with the transcription of their words.

### **3.5 Assumptions**

Now, in order to further demonstrate bracketing of my beliefs, I will identify some of the assumptions that I hold about Aboriginal nursing students and the

nursing program, from my own experience.

- Aboriginal nursing students will encounter occurrences of discrimination and racial prejudice as they undertake their nursing education.
- Students will require time to adjust to the different cultures of the post-secondary institution, nursing, non-Aboriginal society, and the urban environment.
- There is a need for a program such as NAPN within nursing.
- Aboriginal history, culture, and tradition is not taught in nursing.
- There is little cultural content in the nursing curriculum.
- Aboriginal people come from diverse backgrounds.

These assumptions were supported by the data at the completion of this study.

### **3.6 Data Collection**

As noted, once ethical approval was granted, I was able to begin the sample selection. Information regarding the purpose of the study, in the form of a study information sheet (Appendix F), was sent along with a letter of introduction (Appendix E), by mail, to 54 possible participants, using a list of students supplied by NAPN. After at least three weeks, some students were telephoned, in the order in which they appeared on the contact list and I inquired if they had received the letter and if they would be interested in speaking to me. During the telephone

conversation, I briefly went over the study's purpose, goals, and objectives. I was able to answer some questions regarding the length and depth of the interview that was planned. If the student answered in the affirmative, arrangements were made to meet in person, at a location and time of their choosing.

As the student was able to choose the location of the interviews, locations varied from restaurants, to coffee shops, SIAST, and the university. There were some problems with sound quality on some of the recordings due to extraneous noise at some of the locations. Once at the interview site and having introduced myself to the student, I asked if the student had read the copy of the information sheet (Appendix F) mailed to her and had the student re-read or read it before looking at the consent form. Any questions raised were answered and the student read and signed the consent form (Appendix G). A copy of the consent form was given to each participant.

Initial plans for the interview length were for one hour. Actual interview times ranged from 25 minutes to one hour and ten minutes. All the interviews followed the interview guide (Appendix H) and were audio recorded. The interview guide that was used for this study focused on two main areas, the student's experience with the Nursing Education Program of Saskatchewan and the student's experience with NAPN. Field notes were written in a notebook and served to record my impressions and feelings about how the interview process went, and made note of any questions that arose on review of the interview.

I transcribed all the tapes and the students received a copy of their interview transcript. Many of the students signed the transcript release form (Appendix I) at the conclusion of the interview and I mailed a copy of the transcript to them, with a note reminding them that they still had the option of making changes, or deletions as they wished to the finished transcript. Only one student made a change to their transcript after reading it, and that was to clarify a point. After the interview was complete, students were asked to fill out a demographic sheet (Appendix J) which provided additional information including age group and Aboriginal status.

The students were interviewed during the winter and early spring. It was difficult to arrange meetings with first and second year students due to their workload and some students required several phone calls to set up an interview time. In addition, those students who cancelled an interview or changed their minds about participating were also in the first two years of their program and they also attributed this to their workload. I had originally considered arranging a focus group to discuss further issues, but realized that this would entail additional difficulties in getting students together.

### **3.7 Analysis**

Analysis of the data followed Giorgi's method as described in Omery (1983). Thus, I as the researcher, who is committed to research confidentiality, transcribed the tape-recorded interviews. This method consisted of five steps. The first step is where I read the entire description of the recorded experiences. This is followed by

the second step, whereby the material is re-read, more slowly, with identification of units or constituents in the ‘experience.’ The third step is where ‘redundancies’ are eliminated, clarified, or elaborated on. This step is followed by the coding of the data into themes. These themes were then clustered into various categories, or integrated into a description of the meaning of that experience.

Once the transcript release form (Appendix I) was signed by the student, analysis of the data was undertaken. Each transcript was re-read and with the use of “post-its” and two walls in my home, ideas or concepts were identified and documented. These ideas or concepts were then gathered into groups which appeared to form themes. According to Jasper (1994), “use of the participant’s original narrative to illustrate themes” (p. 312) provides evidence of validity as the words serve to confirm the truth of their experiences.

### **3.8 Limitations of the Study**

Limitations identified in this study fall under four categories.

#### **3.8.1 Selection Criteria**

As the students were recruited through NAPN, this study was limited to those who self-identified as being of Aboriginal descent, and to those who were aware of NAPN. Opportunity to interview other students who chose not to self-identify or were unaware of NAPN is extremely limited by the recruitment process.

### 3.8.2 Sample

Some students were difficult to contact, as they may have been out of town, or working, or just busy. Two students did not want to participate and refused on the first contact. Two students did not show for their interviews and I was unable to reach one of them for a second try. The second student agreed to meet with me at a later date. Students appeared more difficult to contact and book for an interview time in the first and second years of the program, and students cited workload as a reason they could not participate.

### 3.8.3 Personal Bias

There may have been an element of self-selection as the study may have attracted those who have had positive interactions with NAPN instead of those who may not. It is easier to come forward with a favourable report.

### 3.8.4 Methodology

The study was limited to student participation only and did not involve those students who dropped out of the nursing program. The study was designed to exclude faculty or other interested stakeholders. An obvious limitation was the opportunity to interview the students only once, since there was no chance to follow-up on any questions raised by analysis of the data. The small sample size is also a limitation, nonetheless, participants identified important issues that were common to many of them.



### **3.9 Ethical Considerations**

Canadian Nurses Association Code of Ethics (1997) for Registered Nurses provided guidance for ethical practice regarding dignity and confidentiality as it pertains to this study. Before I was able to begin the study, approval was obtained from the University of Saskatchewan Advisory Committee on Ethics in Behavioral Science Research (Appendix B) and the College of Nursing Research Committee (Appendix C).

I am aware of the 'special' circumstances involved in conducting research on vulnerable populations (Smith, 1999; Tri-Council Policy Statement, 1998). According to the Tri-Council Policy Statement, "Aboriginal peoples have a unique interest in ensuring accurate and informed research concerning their heritage, customs and community" (p. 6.2). As an Aboriginal person, I feel that I am especially cognizant of the fact that many studies have been unethically conducted on Aboriginal peoples without their full participation or consent. I reiterate my commitment to hear the voices of the study participants and to conscientiously present and interpret the data collected.

## **4.0 Findings**

This section is organized around eight themes that were identified in the analysis of the data collected. Student participants expressed many positive views regarding NAPN and its services and these are organized under things that students liked. Other views regarding things students did not like and aspects of problematic areas are also discussed. These themes provide the framework for the following description of the data.

### **4.1 Why I Chose Nursing**

The reasons that the students gave for wanting to become nurses centered around three themes: influence of others, desire to help others, and the opportunities presented by nursing for diverse work and good pay.

Three of the students had family members who were nurses and this influence helped them decide to enter the nursing program. Alex stated that “my mom was a nurse, so I’ve been around it my whole life.” Another student, Lee, applied for the nursing program when her best friend decided to apply for nursing.

Jamie was influenced to enter nursing by the poor attitude of the nursing staff that she met while hospitalized. “The nurses there were just so untherapeutic and well, they were just terrible, [they had a] terrible attitude, and I thought well, I was

quite sick and I thought, nurses can't be this bad." She said that was when she decided to become a nurse, because she wanted to change that attitude.

Stacey was one of three students who identified the desire to help people as one of the motivating factors to entering nursing. She stated, "I always wanted to help people." Jordan is interested in returning to her home community to work when she has completed her program. Dale wants to work with Aboriginal people when she is finished with her degree, stating, "I decided to come back to school to work in the community, doing health teaching, to Aboriginals."

Students were also interested in the different opportunities nursing could provide. Pat had this to say:

I had a chance to do some teaching, as well, and I really liked it but I didn't think that it would be something that I wanted to do for a career, and that nursing provided a lot of, a lot more diversity and some good options. You could move around, with your degree, and you could go international, or whatever.

#### **4.2 Relationships: Perceptions of the Nursing Program**

While the majority of the students were happy with the nursing program, there were some concerns expressed. Three of the students specifically mentioned the lack of communication as a major problem with the nursing program. Kelly stated, "there's a lack of communication between every facilitator and the students." Jordan and Kelly cited examples of classes being changed or cancelled with very

short notice. This caused some problems for two of the students who had arranged for transportation back to their home communities and had to change plans on very short notice.

Pat, Jamie, Dale and Kim expressed concerns regarding the amount of time allocated for clinical practice, feeling that it was not sufficient. One of the recent graduates, Jamie said, “I thought there would be more patient care throughout the whole program.” Kim, a third year student, stated “I would be, I guess, rather have more clinical stuff than classroom work, and, I’ve been disappointed in that.”

A third year student, Alex, said, “I thought it would be more practical, and more work oriented than it is. And I’m slowly starting to see the validation of why we’re taking some of those touchy feely classes. It’s taken til now, though.”

Stacey, in her second year, also stated that at first the classes on interpersonal development and nursing theory didn’t make sense to her.

Despite some problems and difficulties, as mentioned earlier, many of the students expressed satisfaction with the nursing program. Alex declared, “This is by far the best educational experience I’ve had.” And Stacey said, “I’m really happy to be in the ... nursing program, you know.”

#### **4.3 What I Liked About NAPN**

All of the students interviewed had accessed NAPN, although the frequency varied considerably from student to student. It is difficult to determine which students were more likely to access NAPN compared to others; however, some

students alluded to confidence in their ability to succeed in the program as a reason they did not use it as often as others. Jordan, a second year student, answered the question, have you accessed any of the services offered by NAPN, with “all the time.”

#### 4.3.1 Comfortable Environment

The first and most often mentioned attribute that NAPN provided was a comfortable environment. Jordan said that her first impression of NAPN was “very homey.” Many of the nursing students spoke positively about the environment created by NAPN. Words used to describe it were ‘comfortable’, ‘friendly’, ‘accommodating’, ‘helpful’, and ‘flexible’.

Jordan said that “we called it our other home, when we were homesick, we go there.” Other students felt that it was helpful to them to know NAPN was there. Kim, a third year student, stated, “It’s just nice to know that, you know, somebody is concerned about how you’re doing.” Stacey states, “It’s a home away from home for me, to go and study”. Kelly said that NAPN was accepting as well as comfortable: “it’s just a comfortable place to go, if you have a question. No question is a stupid question, they’re never, you’re supposed to know this and whereas some of those others, the facilitators, are quite intimidating”.

#### 4.3.2 Flexibility

Students also focused on the flexibility of the program and the NAPN staff. Jordan stated;

Usually if you have anything that was, you didn’t know or you needed help

with, they usually knew where to go or they would facilitate whatever you needed help with, or they'd find you someone that would help you write a paper, they'd find someone who would help you study or set up study sessions for all the students that are in NAPN.

She also said, "They're pretty flexible, too, about what you need. And if they don't know, they'll find out where we can go for help."

Dale also mentioned the flexibility of the program. "The NAPN office, the NAPN people are there to help the nursing students succeed, by getting them tutors, by getting them any kind of help that they need, or even, personal counselling, they're there." Stacey described NAPN and one of the student advisors with these words:

If there's anything that I need help with, anything at all, if I'm having problems at home or if I'm having problems with this subject, or if I'm even having problems with another student, which is very rarely, you know, I can just talk to [advisor]) and say, [advisor], you know, and right away, she's right there. She's right on it.

Pat stated that NAPN "provides so many things that you can't get anywhere else."

#### 4.3.3 Variety of Services

Examples of the kinds of help offered by NAPN include the use of a computer in their office, the telephone, help with tutors, essay writing, use of various resources like flashcards, study computer discs, organizing luncheons, cultural events, counselling (personal and academic), and giving students rides. Jordan said

that an advisor gave her a ride to the bank and post office in order to meet a deadline to apply for a bursary. Jamie, a recent graduate of NEPS, stated that what she found most helpful about NAPN was: “Just that they were always on our side and they wouldn’t side with the professors. And that really helped us, because we needed somebody else to look out for our backs.” One student, Sandy, had difficulty narrowing down what was most helpful for her in the variety of services offered and said, “What I found most helpful was the personal support, and the academic support and I like going to the sweats and learning stuff like that”.

#### 4.3.4 Accessibility

One of the first year students, Terry, stated that one of the most important things that she noticed about NAPN was the open ‘door’. “Well, I really like the open door, in [advisor’s]office. It’s always open, you can just walk in there any time. People sit there and talk, and stuff. I thought that was really nice.” It’s also important to note that Terry only utilized NAPN once, yet found this factor important.

Kelly, who is in second year, had this to add: “It’s just... I find it convenient, that it’s right up on the third floor, and you can just go there and she [advisor] leaves the door open, if you need to go in, and use the phone, use the computer, a book or what not.” Dale said, “What I like about this site, it’s very accessible, very, you know, I find them very friendly.”

#### 4.3.5 Student Employment

Five of the students specifically mentioned the assistance NAPN gave them in finding summer employment. The experiences the students described relating to their summer jobs appeared to be positive, and many felt it was an important aspect of NAPN services. Pat stated, “The summer employment that [advisor] has tried to organize, for a lot of the students. A couple of summers I used that opportunity to find summer work, jobs. They both were great.” Jamie, a recent graduate, also had used the summer job opportunity for two of the summers she was in nursing and found them to be “a really good experience.” Alex also got summer employment through NAPN in the summer of her first year. Kim worked during the first and second year at a job obtained through NAPN.

Some of the summer jobs involved working in the NAPN office, assisting with research studies that were carried out in different medical settings, working within the health district, working in a clinic in the community, and working in acute care.

#### 4.3.6 Socializing

Many of the students mentioned the lunches that were organized by NAPN as being helpful and useful in building a sense of community. Lunches are usually held once a month, either at Kelsey Campus or at the University site. Jordan elaborated briefly on the lunches, stating, “We have luncheons where we get together and have lunch, and they get speakers to come in. Like Aboriginal nurses or Aboriginal people in the community come in and talk to us, and provide support.”



Both Jamie and Sandy also found the luncheons helpful, with Sandy having this to say, “Having the potlucks, and the luncheons and stuff, I found really helpful, to develop a support system. You know, because then we’d get together, and then we’d get to chit-chatting and talking about what was going on in our lives.”

Kelly mentioned the office and the opportunity it provided for socializing. “People who have...who you go to school with. You don’t get to talk to them lots, cause there’s so many of us, but when you get in that little office, you have a chance to talk and it feels good”. Stacey felt that the social support was important to her and stated that she found them to be “very, very helpful, you know, you can always find somebody there to, that probably has a lot of the same problems you have.”

#### **4.4 Feeling Different**

##### **4.4.1 Representing the Culture**

“Because there are so few of us, we often represent a lot of, we’re the representative for Aboriginal students or Aboriginal people on campus”. Pat, a third year student, expressed this opinion when discussing her motivation for getting involved in campus activities. Several students alluded to issues involving race and misconceptions or misunderstandings that differences make. One student felt that discussion of alcoholism in one class was ‘stereotypical’.

##### **4.4.2 Uncomfortable Topics**

Jordan made the statement, “It seems like they tend to focus on the negative things in Aboriginal culture”. This statement was in reference to the nursing

program and some of the class content. Topics such as alcoholism, diabetes, violence and poverty, when brought up in nursing classes, made some students uncomfortable. In the words of Sandy:

About being Aboriginal and Native, and because, a lot of times, you took those classes where they spout off different statistics about how Aboriginal people have the highest rates of alcoholism, infant mortality, and they, you know, just paint this horrible picture of Aboriginal people.

Jordan spoke of one class where an uncomfortable topic was raised and her response to the discussion that ensued. "I came home and I was really mad and it upset me. I phoned [advisor] and talked to her about it. And they actually had a meeting last year with the heads of the nursing department and NAPN, to see about the cultural content of the class." There was no indication from Jordan whether or not there were changes made in response to this meeting.

#### 4.4.3 Feeling Different

Sandy felt that these uncomfortable topics also affected the non-Aboriginal students, or their feelings about the Aboriginal students.

You're sitting in a classroom of 80 to 100 students and out of those 80 to 100 students, you're probably 1 of 4 Aboriginal students in there, (laughs) so you kind of feel a little different, you know. And then, after that, it's like your peers or the nursing students that aren't Aboriginal, kind of look at you differently, and kind of treat you differently, it seems.

Bernie also spoke of the comfortable environment created by NAPN when

she spoke about how she felt in some of the classes.

I don't know, it's somewhere where you can go to visit or talk to [advisor] if you have something to talk to her about and you don't feel uncomfortable or secluded or anything, like, sometimes in a class, you look around and it's like, all these, you know, Caucasian people and then you, and if they're talking about an Aboriginal related issue about how, STDs might be highest in an Aboriginal population, all of a sudden, you can't think because it's related to your people or whatever.

Dale made reference to feeling different and also said that she dealt with problems she encountered. "The other students are all great and I can talk to them. There's the odd one I have problems with, but I... deal with it, you know."

#### 4.4.4 Lacking Confidence

Pat alluded to differences between Aboriginal and non-Aboriginal when discussing some aspects of NAPN. While talking about the NAPN environment and how comfortable she found it, she also felt that it may have made it harder for some students to integrate with the main body of students.

And, yeah, it provides us with a comfortable environment so that we don't have to... and then you don't have to feel like you have to go out and associate with the main school and then that also contributes to, when people have misconceptions about your culture, your background, you don't feel as comfortable speaking up about it.

She wished that more communication would occur one-on-one as that helps

to avoid misconceptions and misunderstandings. Pat asserts that this would “establish some sort of balance and respect for each other.”

#### 4.4.5 Experiencing Bias

Some of the students referred to incidents that occurred, that they felt were due to the fact that they were of Aboriginal descent. As the details of these incidents may identify the students, only a brief reference to the kind of problems they experienced will be made. One student felt that her preceptor had a bias against Aboriginal people and this affected her clinical experience. The problem was resolved with assistance from NAPN, who acted in an advocate role for the student.

Another student, Stacey, was upset with certain comments and behaviours displayed in her class and received an apology after the situation was reported to the teacher and NAPN. She felt that the incident was behind her and stated:

Other than that issue, and you know, everything's been great. You know, people get along. We get into small groups and we just kind of become a family, you know. Totally different than when I first started. That day how I felt - I don't feel like that today.

Other students felt that facilitators and instructors often did not have enough knowledge of Aboriginal culture.

## 4.5 Culture

### 4.5.1 Background of Advisors

When students were asked if it was necessary that the student advisors have an Aboriginal background, there were those who felt strongly that they should be Aboriginal as well as those who felt strongly that it wasn't necessary. Bernie felt that the advisors should be Aboriginal and gave this explanation:

because they know a lot about our culture and they can relate to our culture. Like [advisor], she's not Aboriginal. So sometimes you might not want to talk to her about a situation. She's very informative and she's got lots of knowledge about, you know, nursing and stuff like that but there might be a situation, a personal situation, that you would rather not talk to her about. Yeah, I think that it's important that they be Aboriginal.

Pat, a third year student, thought that the cultural background of advisors was an important factor. She had this to say:

Yeah, it's essential. It's essential. You know, you feel comfortable with people that you have something in common with and people who know your background as Aboriginal that you feel safe as a person, so they can relate to you and you feel that you can trust them.

She was also quick to point out that restricting staff to those with an Aboriginal background would not be a perfect solution.

But I also think that it's important to have people who are not Aboriginal, as well, involved in the program. Because it becomes too isolated and too

insulated. I talk to just about everybody, you can't just associate with people that are like you cause then you really couldn't function in the world.

Kelly, Jordan, and Stacey also felt that it was not imperative that the staff of NAPN be Aboriginal, but felt that knowledge of Aboriginal history, culture, and traditions were important. However, Jordan felt that at least one of the advisors should be Aboriginal as this person would have knowledge about funding issues, working with the bands, and cultural issues. Kelly also stated that an Aboriginal student advisor might not be as intimidating for Aboriginal students.

Alex brought up the issue of validation and had this to say;

It would be, like, you know, teaching in a Jewish school, if you weren't Jewish. Like, you can't really, I don't know, there's no validation in what they're saying if they don't really come from a background similar to what they are teaching.

Sandy was able to state that an advisor with an Aboriginal background would be an asset, but was not absolutely necessary. Her concern was that the person working in this position have sufficient knowledge and experience with Aboriginal culture. She said:

To support Aboriginal students, I think that they would have to have a really firm understanding of Aboriginal history and Aboriginal culture and ... like a really good foundation in all of that, to be able to support Aboriginal people. Because you can't be White and then, come in to a program and you say, I know, I can validate what you're going through.

And, because they just wouldn't know.

#### 4.5.2 Cultural Experiences

As mentioned earlier in this paper, the students come from diverse backgrounds. Some of the students came from Aboriginal communities where they were in the majority and had actively practiced their cultural traditions and spoke their native language. Other students were raised in non-Aboriginal communities or in homes where their Aboriginal heritage was not a part of their lives. The cultural activities organized by NAPN struck a strong chord among many of the students. Pat stated that one of the most important things she felt about NAPN was:

"I think that, the most important thing is that it taught me to grow as a person, hopefully, a better person. It taught me to become more aware of my own culture, and my own background and feel some pride in it."

Sandy made a couple of references to going to the sweat lodge ceremonies and how she liked that aspect of NAPN services. Jordan felt that NAPN gave students an opportunity to learn about their culture.

Most of, a lot of us grew up off the reserve and you don't have the language. We lost the language and a lot of the traditions. So NAPN is a way of teaching us the traditional ways and recover the language, if you're wondering, and they can set you up with elders.

Jamie was one of the students raised in a non-Aboriginal community. She said that she had no clue about Aboriginal culture or language prior to meeting NAPN staff. "They made me aware of my cultural aspects and I got to know about

their spiritual rituals, you know, like feasts and gatherings and pow-wows”. Another student, Alex, said: “I don’t come from a very cultural family. My family isn’t very ...they don’t practice a lot of our culture.” She attended several cultural events and felt she had learned a lot.

Even though Kelly did not access NAPN very often, she acknowledged: “And I just, I find it so, I don’t quite know the word, but I just find it comforting to have, you know, little cultural corner you can go to.” Even some of those students who didn’t practice their Aboriginal culture or attend the cultural events thought that having access to them was important. Kim stated: “I think it’s important for everybody to keep their culture.”

#### **4.6 What I Didn’t Like**

Several students admitted that access to NAPN staff was sometimes problematic due to the following reasons: 1) NEPS was located at two different sites in Saskatoon, 2) staff turnover and 3) many of the meetings NAPN staff attended were at the other site, usually at the University.

##### **4.6.1 Two Locations in Saskatoon**

Kelly stated: It’s often hard, cause [advisor] is not there all the time. So, you go to... you walk by, if you have a question, and there’s not always anyone in there.” However, she felt that this was a minor problem and in the incident she related, she was able to talk to the student advisor the next day. Pat also mentioned this:



One of the negatives, it's just a fault of the program, is that we're divided, SIAST to the U of S, but there's nothing they can do about that, really. But sometimes, you know, it would be nice if they were at one spot. But you know, how can you do that if the program is divided into two?

This statement was echoed by Alex, "I don't access it a lot, but there have been times when I have come over there, because there is two locations, it's hard to co-ordinate people being in one place."

#### 4.6.2 Staff Turnover

The second reason there may have been difficulty accessing staff was due to the turnover of staff at NAPN. While the primary student advisor (PSA), who is not a nurse, has been a constant, turnover has affected the Registered Nurse Student Advisor (RNSA) position. RNSA #1 was in the position from January 2000 to August of 2001. She was replaced by RNSA #2, who worked from October 2001 to April 2002. RNSA #3 was in this position from June 2002 until March 2003. RNSA #4 started January 2003. All of these positions were part-time, from a .5 to a .8 of full time equivalent. Funding for two full-time advisor positions is a goal for NAPN. (Val Arnault, personal communication, February 28, 2001). They feel this would allow them to increase the cultural and academic programming they would be able to provide.

Some of the students were aware of this. Jordan had this to say:

Last year, they had a turnover in one of the counselors, she left at Christmas. And that was kind of a big thing for us because after that it

was just [advisor], trying to go back and forth between the two places. So it was harder to access her. Because she was at both places and some days we'd have nobody at all at the office at Kelsey. And then I think we pretty much spent most... half of that semester without.

Kelly made a comment regarding the presence of a new advisor in the office at Kelsey campus in regard to someone being present in the office more often. "I've noticed her there a lot... a lot more." Jaimie thought:

Yeah. Sometimes we could have used somebody there constantly. And we know that they, like in the mornings, I don't know if they switch back and forth still but it would have been nice to come and see them and they weren't in the office, just to get to get paperwork back from my Indian band and just talk to them as well.

#### 4.6.3 Student Segregation

Three of the students identified segregation as a potential problem with NAPN. Alex was concerned that the way the program is set up may discourage students from interacting with the larger group of non-Aboriginal students.

The only thing I ever find, that seems... is a problem, and I think, I don't know if it has to actually do with the program or a person's, or people's personality is the, not segregation, cause it's not segregated, but you know, they seem to kind of group all the Native students together and they kind of just stick together, and there's not a whole lot of filtering out into the, the rest of the population of nursing.

Pat said that what she found least helpful about NAPN was, "I guess sometimes they, it makes it easier for us not to integrate with the rest of the student body." Sandy had indicated that NAPN provides such a comfortable environment that it makes it easier to stay within this group of Aboriginal students, instead of associating with the main group of nursing students.

Other students, when asked specifically if they felt that NAPN fostered segregation, denied this. Stacey responded to this question with, "Yeah. No. Well, it probably would but we're not trying to make it like that, you know." She said that she would offer all the services to other students, not just Aboriginals. Stacey, Kelly, Bernie, and Alex, specifically mentioned that they brought or encouraged non-Aboriginal students to come into NAPN. Stacey stated, "I've been bringing some of my classmates in there. Because everybody's welcome. It's not just for Aboriginals, everybody's welcome."

This sentiment was echoed by Bernie who said,

And that's the other thing they do allow, they encourage us to bring our non-Aboriginal friends to the office, or to... if we had a focus group, a tutor focus group, or you know, they did orientation, through us, if we want to invite our friends or whatever. And that's good because... well, the majority is not Aboriginal, so, most of your friends are not Aboriginal in the school system.

#### **4.7 The SIAST Aboriginal Student Activity Center**

When asked about other student support services accessed, several of the students confirmed using the Aboriginal Student Activity Center (ASAC). The ASAC is located on the main floor of Kelsey Campus and is available for all Aboriginal students to access. They have two counselors on staff, one who has a psychiatric nursing background.

The counselor is available to provide confidential counselling on academic, personal, social, family and financial matters to students. Through her, arrangements can be made for individual or small group tutoring. The other counselor also provides individual and small group tutoring and assistance in learning to use the computer. The Center arranges various activities throughout the year, including welcome barbeques, a Christmas luncheon, various networking activities and an Honor ceremony at years end to celebrate graduates from Kelsey campus programs. The ASAC also produces a newsletter for students.

One student used the ASAC computer during the first year at SIAST as she didn't have access to one at home. Dale, Stacey and Sandy used the center for counselling services. Jordan got ASAC assistance with student loan papers. Pat stated she went to a leadership conference for Aboriginal students that was sponsored by the ASAC. Kelly made reference to the ASAC when comparing it to NAPN, and felt that a drawback with ASAC was; "...having to make an appointment for the student services downstairs."

#### **4.8 Misconceptions Re: Role of NAPN**

Terry, a first year student, thought that NAPN had something to do with the equity seats that Kelsey SIAST holds for Aboriginal students. And as she stated;

the only thing I thought, in the beginning was, like, how that I didn't even sign up for it. You know, maybe on the application form, they should have, like a box or something like that, because, technically with my average and stuff, I didn't need to use a NAPN spot. You know? I could have just gotten in on my average and then maybe other Aboriginal students could, maybe, that needed extra help getting in, could have used that spot.

Another student thought that NAPN had something to do with choosing who got into the Nursing program. She mentioned this in the post-interview time, so there is no quote nor am I able to mention her pseudonym, but this information is important for NAPN to note.

#### **4.9 Summary of Findings**

Findings from the study indicate while these students entered into the nursing program for several reasons, there are some similarities. Students wanted to become nurses for three main reasons, due to the influence of others, out of a desire to help others and for the range of opportunities offered to them by a nursing career.

Relationships played a pivotal role in the student's satisfaction with NAPN. Students liked the comfortable environment created by NAPN, the flexibility and accessibility of the NAPN program, and the prospects for student employment and socializing.

Some issues which caused some of the students concern associated with a feeling of 'difference', experiencing bias, and lacking confidence, in this respect, related to the fact that they were Aboriginal. Aspects related to culture concerned the students. Perceptions regarding the background of the student advisors was mentioned as well as lack of cultural knowledge and content in the nursing curriculum. The cultural experiences offered by NAPN were welcomed by most of the students. Two aspects that some students expressed concern over related to the suggestion that NAPN may inadvertently foster segregation and also to staff turnover in NAPN.

## **5.0 Discussion**

### **5.1 Introduction**

This study was undertaken in order to ascertain student perceptions or satisfaction with NAPN. This section will focus on discussion of the findings. Those characteristics of the NAPN program that students found favourable will be discussed, along with areas that caused them some concern.

Part of the purpose of this study was to ascertain the effectiveness of NAPN. While the study did not specifically focus on the goals set by NAPN, part of this discussion will center on the goals and how well NAPN has met them, as perceived by the students. This chapter concludes with a list of recommendations for NAPN.

### **5.2 Relationships**

Despite the diversity among the Aboriginal students in NEPS, it would be reasonable to say that in Aboriginal communities, the family tends to provide emotional support and sets the standard (culturally and historically) by which the Aboriginal student lives. The connection of Aboriginal nursing students to their communities has been recognized in the initial work setting up the Native Nurses Entry Program at Lakehead University (Morton, et al, 1995).

Those students who identified family influence on their decision to enter the nursing program may have an increased probability of graduating from NEPS. Katt identified First Nation persisters as those students who “have developed a strong

support system of people who believe in their ability to achieve” (1995, p. 54).

Baptiste (1994) also credited family support as a helpful factor in assisting Native students to remain in university.

The ability of NAPN to provide a supportive environment by fostering a sense of community and family within the NEPS is part of the reason for its success in reaching and supporting students. The comfortable ‘homey’ atmosphere established by NAPN is an important factor noted by almost all of the students interviewed for this study.

The College of Nursing and SIAST demonstrate their commitment to a diverse student population with the development and support of NAPN. However, several of the students mentioned a gap between NEPS and NAPN. One stated that there did not seem to be much interaction, and the two offices at SIAST seemed quite separate. And although one student did see NEPS faculty in the NAPN office at times, this did not seem to her, to be a common occurrence. It may be helpful for NEPS faculty to collaborate and interact more with NAPN, perhaps by participating in some of the student luncheons or cultural activities. This would serve to affirm the role of NAPN as a integral and important part of the nursing education process.

Other students felt that some of the nursing instructors / professors had little understanding or knowledge of Aboriginal culture. An example given by a student described an instructor who referred to smudging as an alternative therapy. The student further stated that smudging, in reality, “is a form of prayer.” Faculty



members need to be more aware of Aboriginal culture and traditions if they are to include aspects of it in their curriculum. Failure to do so will only further alienate those Aboriginal students in the classrooms and misinformation will continue to contribute to the misconceptions and stereotypes that exist about Aboriginal people.

This point was brought up in Leslie's study (1998):

The study of different cultures and their beliefs and values, in addition to time spent on values clarification, could provide an initial awareness of differences and a validation of diversity for all students. Content with cultural relevance would both affirm and give added meaning to Aboriginal students (p. 70).

### **5.3 NAPN Services**

Accessibility and flexibility were two of the attributes of NAPN that almost all of the students mentioned during their interviews. The ability of the students to access NAPN services at short notice, without making an appointment to see an advisor first, was noted to be an asset. Even with the NAPN staff working out of two locations in Saskatoon, students were able to reach an advisor quickly. This characteristic of NAPN is important to the students as it allows a quick and personalized response to their query. It will be interesting to note if NAPN can sustain this level of response as the number of Aboriginal students in the NEPS continues to increase. Maintaining this level of service may necessitate an increase in the number of advisors available to work with the students in NAPN.

Another feature of accessibility to NAPN lies in the decision of NAPN staff to leave their office doors open. Students felt that this reveals a level of trust in the students not found in many other post-secondary institutional programs. An example given by one of the participants pointed out that the NEPS offices at SIAST are not as accessible. Part of the reason may be the physical layout of the offices, which are located behind a door with a large desk and secretaries that you must pass by in order to see an instructor. An open door also contributes to the impression that NAPN is a welcoming and home-like environment, a place where you can just walk in, sit down and put your feet up. It is a place where friends are welcome, as demonstrated by students who brought their non-Aboriginal classmates into NAPN.

Flexibility of the program was the other facet of NAPN that students appreciated. Services available appeared to be limited only by what the advisors were able or willing to provide. Jordan provided an example of this flexibility, when she stated that she received a ride to the bank and post office from one of the advisors in order to meet a deadline to apply for a bursary.

Summer employment is one of the services offered by NAPN that students found extremely useful. Five of the students accessed this service and all stated that they found the experience to be valuable. One student mentioned that she did not have to worry about finances because she was able to secure employment through NAPN for two summers. Another student mentioned that NAPN found out what she had wanted to do after graduation from NEPS and assisted her in finding work in

this area of nursing. She found this to be particularly valuable and beneficial to her vision of nursing.

According to NAPN staff (Val Arnault, personal communication, April 14, 2003) 11 students were placed in summer jobs in 2001 and 12 students in the summer of 2002, and they hope to place 17 this summer (2003). The majority of the funding for student placements comes from Health Canada. NAPN also received five Health Research grants from the Institute on Health Research for Indigenous People, Undergraduate Studies for 2002.

For the summer of 2003, NAPN has collaborated with other health regions to help place students. These health regions include Mamawetan, Prince Albert, and Saskatoon. Saskatoon Tribal Council is also going to provide some funding for First Nations student(s) to be placed in a clinical setting, although the amount is unknown at the time of communication. The Health Sciences Library has also provided funding for 2003, to allow one student to work there over the summer. NAPN was unsuccessful in obtaining Health Research grants for 2003. NAPN plans to hire one student for their office and also place one student with the Aboriginal student advisor in the College of Arts and Sciences.

Students are supervised through their employer and NAPN keeps in contact with the student and the employer to monitor their progress. Students are also required to write a report at the end of the summer, which is a short evaluation of their work experience.

The socialization that NAPN facilitated played an important part in the stories that the students shared. According to Baptiste (1994), “Loneliness, isolation and homesickness are factors which must be considered when examining the high attrition rate of Native students” (p. 67). Some of these factors come into play whether or not the student is traditional (aware of and living their culture), non-traditional (perhaps urban) or a combination of both. The ability to identify Aboriginal people in post-secondary institutions, either as role models (faculty or guest lecturers) or as fellow students can help to alleviate the feelings of isolation.

#### **5.4 Cultural Factors**

According to the literature, Aboriginal students in universities or post-secondary institutions enter a world where their history, beliefs, values and culture are neither recognized nor validated (Baptiste, 1994; Jenkins, 1999; Koertvelyessy, 1990). Aboriginal students have culture specific needs and educational institutions that aspire to recruit and retain Aboriginal students must recognize this factor (Jenkins, 1999; Weaver, 2000; Wilson & Wilson, 2002). Koertvelyessy (1997) stated:

Providing for an Indian presence on the campus or at the school site is equally important. This means planning for social activities, such as Powwows. These activities are important to providing a cultural connection with the home base regardless of whether it is an urban or a reservation area. (p. 84)

In Jenkins' (1999) review of the literature, three authors who studied Native American attrition from post-secondary institutions indicated that cultural differences may be the most significant factor which leads to attrition of these students. Koertvelyessy (1997) also emphasized the importance of role models and mentors for support and guidance of Native American students in nursing programs. NAPN provides an Aboriginal presence for Aboriginal students at SIAST Kelsey Campus and at the University of Saskatchewan. The Aboriginal student advisors provide role models for the students. One student described NAPN as a 'cultural corner.' NAPN serves to re-affirm students' Aboriginal identity and validate their presence at the College of Nursing and SIAST.

There appears to be an issue regarding the background of the student advisors. While most of the students did not feel the advisors had to be Aboriginal, there was also the indication that there were some issues they would not feel comfortable discussing with a non-Aboriginal advisor. While students acknowledged the value of the nursing experience the non-Aboriginal advisors brought to the position, it was still evident that there were issues they would not broach with them unless they were Aboriginal as well. Whether this had to do with trust or with the perception that the advisors would not understand the problem was not clearly evident. However, in Leslie's (1998) study, students did not feel that they could approach their non-Aboriginal teachers for "anything outside of class content, and none felt particularly respected or cared for personally" (p. 62).

Leslie (1998) also stated that the National Native Access Program to Nursing (NNAPN) was described by the students in her study as a place “where people with shared values were able to talk freely, often ‘venting,’ but feeling confident they were understood without having to explain” (pp. 49 – 50). The perception of shared values may partially explain the ambiguity the Aboriginal students felt regarding the non-Aboriginal student advisors.

While there was not a specific question on racism, discrimination, or prejudice, several of the students alluded to these issues. Other students felt singled out, especially when classroom discussion focused on Aboriginal people or issues relating to Aboriginal people. This is consistent with findings in the literature. Weaver (2000) stated that, “sometimes when cultural content was lacking in classes, professors turned to American Indian students and placed the burden on them to fill the gap. Students often experienced this as being very awkward” (p. 12). A couple of the students made a reference to being the spokesperson for Aboriginal people or the representative for Aboriginal people on campus. Merrill (1998) described this as a form of racial prejudice, when minority students are asked to give their opinions on issues pertinent to their minority group.

How can a teacher avoid placing students on the spot? I think that you must ask the one or two Aboriginal students their opinion, also ask other students. Have guest speakers or guest lecturers from the Aboriginal community to speak on special issues. NEPS faculty also has to become aware of this situation and learn to avoid it.

Cultural awareness and sensitivity classes are very important for faculty, especially in light of the increasing diversity of the nursing student population.

Merrill (1998) believes that culture is the influencing factor in students' responses to their environment. "Culture is the acquired knowledge that people use to generate behavior and interpret experience" (p. 59). Katt (1995), in her study of Aboriginal nursing students found that "Acceptance of cultural differences remains the largest challenge for students. Feeling that their cultural identity is not readily accepted leads to low self-esteem." (p. 50).

Interestingly, 'cultural conflict' has been a label used to describe issues of racism on campuses (Huffman, 1991). There has been little research on the role racism plays in attrition of minority students in nursing programs, with a tendency to focus on issues such as academic preparation, financial and economic factors, and lack of community, parental and institutional support.

Several authors have documented the barriers to minority students in nursing (Baptiste, 1994; Huffman, 1991; Manifold & Rambur, 2001; Morton, et al, 1997; Tate & Schwartz, 1993; Yurkovich, 2001), and this has been touched upon in Chapter One of this thesis. One of the barriers relates to faculty and their inadequate preparation in meeting the learning needs of culturally diverse students (Boyle, 1986; Campbell, 1994; Campbell & Davis, 1996; Dickerson & Neary, 1999; Merrill, 1998). A couple of the students related incidents that occurred within the classroom that caused them some distress. Classroom environments are influenced by faculty

and student interaction and require that some consideration be given to issues of culture and difference.

Another area that appeared to positively affect Aboriginal students involved the cultural content of NAPN programs. Most of the students participated in at least one cultural event and found it to be of value. Due to the diversity of the students interviewed, there was little agreement as to which cultural event was more valuable, as different events were more important for different students.

### **5.5 Lack of Cultural Content**

Pat mentioned the lack of cultural content in the nursing curriculum. She felt there was a need to include it in the nursing program, and was surprised that her non-Aboriginal classmates did not seem to recognize the need for it. She stated;

A lot of the content is not focused on different cultures and diversity. And I was surprised at the students, as well, because they don't seem to see leaving behind and trying to include that kind of curricula or that content.

Weaver (2001) reports that diversity content in nursing curriculum in the United States has not been implemented on any kind of scale - this, despite the fact that the National League for Nursing in the United States requires diversity content in nursing education. Other authors report that little progress has been made in incorporating cultural content into nursing programs (Campbell & Davis, 1996; Dowell, 1996; Merrill, 1998; Yurkovich, 2001).



Notwithstanding the lack of cultural content, evidence in the literature points to the fact that the curriculum of most nursing programs is embedded in Euro-western values. “Generally, teachers do not intentionally discriminate against First Nations students, but through their teaching methods and interactions, they demonstrate the priorities and values of the dominant society in the school and in the classroom” (Duff, 1998, p. 4). It is imperative, especially in light of the changing demographics in Saskatchewan, that the NEPS incorporate more cultural content into the curriculum.

### **5.6 Previous Research of Saskatchewan Aboriginal Nursing Students**

At this point in this paper, I would like to discuss additional findings of Leslie’s (1998) study of ‘The Experiences of Aboriginal Nursing Students at the University of Saskatchewan’ and relate them to selected findings in this study.

As mentioned earlier, students identified three main themes affecting their decision to enter the nursing program. These were the influence of others, a desire to help others, and the opportunities presented by nursing for diverse work and good pay. Leslie found similar themes in her study and identified these as “family influence, as well as wanting to do something to help their own people and caring” (p. 23).

Many of the aspects of NAPN that students liked in this study, reflect findings noted in Leslie’s study. During Leslie’s study, the program was the

National Native Access Program to Nursing (NNAPN), but the sentiments expressed by the students remain consistent with those expressed about NAPN. “Those who found NNAPN to be ‘very important’ said it offered them needed comfort and support. NNAPN was described as ‘like family’” (p. 49). Of the seven participants in Leslie’s study, five of them stated, “that their main social contacts at university were those made through the NNAPN program. That was where they obtained information, shared experiences, and vented their own frustrations and concerns” (p. 60). This mirrors comments made by participants in this study, as documented in Section 4.3.6.

Students reported feeling different when they were asked to ‘represent the culture’ in their classes. In Leslie’s study of Aboriginal nursing students this issue was raised by a couple of students, who stated they felt uncomfortable with being single out and “being asked to speak for all Aboriginal people”(p. 34). One of Leslie’s recommendations for teachers of Aboriginal nursing students was to “avoid drawing particular attention to Aboriginal students in the class by asking their thoughts or opinions unless previously arranged, particularly in the first-year(s) of the program” (p. 74).

Students felt that there was a lack of cultural content and cultural awareness in the nursing curriculum. This conviction is reflected in findings in Leslie’s study, which stated, “In addition, participants generally felt that their teachers did not understand their culture or what they were experiencing, which at times hindered their learning” (p. 62). The Aboriginal nursing students in her study “mentioned the

need for more Aboriginal content in the nursing program, especially for those intending to practice in Saskatchewan” (p. 70).

### **5.7 The Effectiveness of NAPN**

In their June 8, 2000 meeting of the NAPN Advisory Committee, the members compiled a list of four goals and sub-goals (Roberts, 2001), which they accepted through consensus. These goals and their sub-goals will be discussed according to respondents’ comments in order to ascertain the extent of NAPN’s success in meeting these goals with the students.

Goal #1: Student support is essential for success.

- 1a) Provide opportunities for support and social interaction.
- 1b) Assess individual academic needs.
- 1c) Provide services/programs to meet identified needs.
- 1d) Advocate on behalf of students within organizations, both internally and externally.

Goal #2: Creative use of resources is essential for sustainability and excellence.

- 2a) Maximize financial, human, and cultural resources.
- 2b) Maintain a healthy environment.
- 2c) Promote staff wellness and development.

Goal #3: Underlying values / beliefs provide guidance and direction. The values of NAPN are: autonomy, respect, cultural awareness / sensitivity, accountability,

creativity, flexibility, assertiveness, resourcefulness, adaptability, resiliency, humour, and feisty-ness.

Goal #4: Strong liaisons with communities are essential for success.

- 4a) Identify appropriate resources.
- 4b) Keep apprised of current issues.
- 4c) Create and maintain connections.
- 4d) Nurture relationships with communities.
- 4e) Promote nursing as a career to the Aboriginal community.
- 4f) Promote awareness of Aboriginal culture to the Nursing Education community.

### **5.7.1 NAPN Goal #1 Student Support is Essential for Success**

The first goal articulated by NAPN was that providing student support is essential for success. So how do the students perceive NAPN's success at achieving this goal? During the interviews the students expressed a lot of support for NAPN. There appeared to be a reluctance to say anything negative or that could even be misconstrued as negative about NAPN, its staff, or the program. This may have been due to limitations of the methodology chosen for this study or perhaps due to a cultural issue. Use of focus groups may have allowed the students to be more open or candid about potential problems. If this is due to cultural issues, it may be that Aboriginal students simply may have a more respectful approach to an evaluation of NAPN, or a reluctance to criticize friends. It would be difficult to determine this

based on the data collected.

1a) Provide opportunities for support and social interaction.

Does NAPN provide opportunities for support and social interaction? At the beginning of each school year, there is an orientation for first year Aboriginal nursing students arranged by NAPN. Besides allowing the students to obtain their First Aid and CPR, this provides an opportunity for first year students to meet each other. Other events, such as the monthly luncheons, serve to bring first year students together with upper year students in order to provide an opportunity for mentoring and role modeling to occur. Occasions when cultural activities are planned provide the same opportunity for social interaction as well as offering the students a chance to experience Aboriginal culture. The office at Kelsey Campus is in a central location and in a main corridor so it offers easy admittance for students passing by. Almost all of the students felt that the social support offered by their peers was an important factor in their success or potential success in the nursing program.

1b) Assess individual academic needs.

Assessment of student need was an ongoing process as the students gave many examples of services that NAPN offered in response to their needs. Two of the students who spoke to NAPN staff before entering the NEPS stated that they received advice regarding which courses to take and which electives to focus on.

Almost all of the students interviewed attended one or more of the tutorials offered by NAPN. Dale indicated that some of the tutorials were set up in response

to student requests. The resources offered by NAPN, for example, the Anatomy and Physiology (A & P) computer discs, were acquired in response to student need.

From the interview with Jordan, it appeared that some students had tutorials set up on an individual basis, dependent on the student need. Students also mentioned that NAPN provided assistance with writing papers, editing, and research.

1c) Provide services / programs to meet identified needs.

Did NAPN provide services and programs to meet identified needs? The flexibility of the NAPN staff and program in addressing issues of concern to students was mentioned by almost all of the participants. Those students who accessed different services appreciated the wide range of services offered to students. Even informal offers of assistance were made, with two of the students pointing out that NAPN provided them with rides on occasion. NAPN offers a wide range of services ranging from the personal to academic to financial. NAPN assisted those students who had difficulty with funding. This may have included contacting the various bands or the Metis locals, or assistance with locating and applying for scholarships or bursaries.

Many of the students took advantage of the opportunity to attend the first year orientation and took their CPR and First Aid certification at this time. They also attended the luncheons or gatherings, tutorials, talking circles, and the cultural activities (elders, smudging, the sweat lodges, and setting up tipis). Some participants attended the Aboriginal Nurses Annual Conferences when they were held in Calgary and Saskatoon.

When asked how NAPN could improve their services, students were often at a loss to answer. Some of the responses included improving the NAPN website, acquiring a larger office at the Kelsey Campus site, and making sure that there was funding and staff at both sites. One student, who had only used NAPN once, stated that she did not use the services but acknowledged that others may use the services more.

1d) Advocate on behalf of students within organizations, both internally and externally.

The last point noted under this goal is that NAPN advocates on behalf of students within organizations, both internally and externally. A couple of the students, when discussion turned to NAPN providing a liaison or advocate for them, strongly supported the need for NAPN's advocacy role. One student spoke about a NAPN advisor who accompanied her to a meeting with her professor. She stated that she didn't know what she would have done without her assistance. She thought that she would have given up and quit the nursing program. Other students spoke about the fact that NAPN staff would support them if there were any personal or academic problems with professors or instructors.

To illustrate NAPN's advocating for students externally the efforts to obtain summer employment for the Aboriginal nursing students is an example. This involves reaching out to communities, Aboriginal and non-Aboriginal, in order to secure summer employment funding and employment opportunities for students.

**5.7.2 NAPN Goal #2 Creative use of resources is essential for sustainability and excellence.**

**2a) Maximize financial, human, and cultural resources.**

The first point under this goal is to maximize financial, human, and cultural resources. These issues were not explored to any depth in the interviews carried out with the Aboriginal nursing students. The issue of finances was raised by one student, Pat, who stated that a support program needs:

Permanent funding, because you're not going to get the quality of service that you want if you have to move in and out of your job not knowing if the program is going to be gone the next year. And you're not going to get the students to feel comfortable going there if the program is here one year and gone the next.

NAPN is funded on a yearly basis with no permanent funding arrangement in place. This makes for uncertainty and may make it difficult to recruit a second permanent student advisor. NAPN has had to hire several different staff to fill the advisor role on a temporary basis. It is commendable that NAPN has been able to carry out its program and deliver its services with the disruptions caused by changing staff. NAPN has been creative in its utilization of staff and its limited financial resources in order to create a program that appears to play a significant role in the support of Aboriginal nursing students.

NAPN has organized several cultural events, including talking circles and sweats (sweat lodge). The students have pointed out that they have obtained the



The students acknowledged many of these values in NAPN. They have stated that they felt respected and valued as Aboriginal nursing students and individuals. The participants in the study who noted that it is not a part of NEPS and that they feel NAPN is there for them have recognized the autonomy of the program. Autonomy and respect are two critical elements of any student support program as these allow trust to develop. Cultural awareness and sensitivity are necessary for the program to operate in an environment that does not reflect their own culture. The advocate role that NAPN plays demonstrates assertiveness, accountability, resiliency and creativity and perhaps feisty-ness. Resiliency and humour are difficult to assess via this study.

#### **5.7.4 NAPN Goal #4 Strong liaisons with communities are essential for success.**

##### **4a) Identify appropriate resources.**

The first point under this goal is to identify appropriate resources. This point is partially demonstrated by NAPN's use of the resources in tutoring the students. Many of the students were quite happy with the availability of resources supplied by NAPN. Examples of these include the use of a tutor from the Health Sciences Library at the U of S to assist students with research and writing papers. NAPN also hired tutors specifically to work with students on Anatomy and Physiology and other topics as requested by the students. Other resources can refer to Aboriginal contacts who assist with the ceremonial aspects of the NAPN program. Some of the resources

NAPN has at its disposal include the reference material in the offices. Assistance and guidance with applications for scholarships and bursaries was also popular with the students. NAPN also has the use of two offices, one at the University and one at SIAST Kelsey campus.

4b) Keep apprised of current issues.

The second point is for NAPN to keep apprised of current issues. This is difficult to assess from the viewpoint of the students.

4c) Create and maintain connections.

4d) Nurture relationships with communities.

On the part of the students, mention was made by Alex of some of those nursing students who graduated who come back to NAPN to visit. It would appear that NAPN maintains connections with former students. One of the nursing students was placed in an Aboriginal community for her summer employment and this could be viewed as creating and maintaining relationships with the communities.

4e) Promote nursing as a career to the nursing community.

Promote nursing as a career to the Aboriginal community is point number five, and may be demonstrated by the increasing number of Aboriginal nursing students in NEPS, although there may be other causal factors. If one student advisor in NAPN is an Aboriginal nurse, this also promotes nursing through the use of a role model. One of the students mentioned participating in a talking circle that brought Aboriginal nurses and nursing students together to talk about their nursing

education. This also would have resulted in promotion of nursing to the Aboriginal community.

4f) Promote awareness of Aboriginal culture to the nursing education community.

The last point is to promote awareness of Aboriginal culture to the Nursing Education community. Another student pointed out that some NEPS faculty enter the NAPN office if they see something happening. It is difficult to assess, with the information available, if there is anything more organized to promote Aboriginal culture to the nursing education community. From the students' perspective, it was not an issue that they raised.

## **5.8 Recommendations**

The following are some recommendations for NAPN. Some of these recommendations may already be in place or being acted upon. It is hoped that they will serve as a guide for maintaining or implementing a course of change that may improve NAPN and subsequently the learning and social environment for Aboriginal students in NEPS.

### **5.8.1 Practices That Should Continue**

- Promote awareness of Aboriginal culture within nursing education and to nursing faculty, by offering cross-cultural experiences to other students and educators.

- Lobby for increased Aboriginal content in the nursing curriculum, especially in light of the changing demographics in Saskatchewan.
- Lobby for increased number of Aboriginal faculty in NEPS.
- Lobby for stable, permanent funding for NAPN.
- Continue to advocate for students in their interactions with faculty.
- Advocate for student employment opportunities.
- Assist students in finding summer employment in an area of their interest.
- Have one student advisor who has a nursing background as this provides a role model for the students.
- Accrue resource material such as A & P models and a new computer.
- Inform students of NAPN.

### **5.8.2 Practices That Should be Encouraged**

- Assist NEPS when possible to increase an Aboriginal presence in the classroom, perhaps by aiding NEPS to contact and utilize guest speakers or guest lecturers from the Aboriginal community.
- Invite non-Aboriginal students to participate in some cultural activities and tutoring sessions.
- Maintain flexibility in program response to meet student needs, including a wide range of services offered.
- Invite NEPS faculty to participate in Aboriginal cultural events.
- Increase NEPS / NAPN collaboration and interaction.
- Acquire a larger space for the office at Kelsey campus.

- Follow up with those students who graduate and those who drop out of NEPS, in order to access their ideas and thoughts about how the program and services could be improved.
- Involve family in some NAPN activities.

### **5.8.3 Areas That Need to Be Addressed**

- Risk of Aboriginal student isolation from non-Aboriginal students.
- Regarding services of NAPN, increase the number of advisor positions. One student advisor was available on a consistent basis, but the other part-time position experienced considerable turnover.
- Use of non-Aboriginal advisors.
- Inform students about NAPN to minimize misconceptions

## **5.9 Questions for Further Research**

I am hopeful that this thesis may raise questions for other researchers and that they may use this as an impetus to do further research in this area. Some questions that have come to mind during the course of this work are as follows:

- Speaking to those Aboriginal students who have graduated from NEPS may provide a different perspective on NEPS and NAPN as these people would no longer be students.
- Interviewing the faculty and other stakeholders.
- How does the Aboriginal community feel about the NAPN program and NEPS.

- Track and analyze retention rates of Aboriginal nursing students.
- Compare NAPN with support programs for nursing students at other schools of nursing.
- Further research on Aboriginal nursing students' views of NEPS.
- Cultural content in nursing curricula in Canada, are we doing enough?
- Where are the Aboriginal nursing graduates working and why?

### **5.10 Conclusion**

This study was designed to examine the perceptions of Aboriginal nursing students in order about the effectiveness of NAPN in meeting their needs. This study demonstrated that NAPN does an effective job of meeting student needs, as perceived by these students. The participants in this study were unanimous in their praise for NAPN and its staff. Areas which caused the students concern did not diminish their support for NAPN.

Those aspects of NAPN that students identified as being the most helpful centered on the positive, supportive environment created by NAPN, which was described by the students as home-like and welcoming. Opportunities to engage in cultural activities and socializing were welcomed by the study participants, who deemed them important to their success in the program. Participants were unable to identify any needed service that was not offered by NAPN and lauded the variety of services that were offered. The accessibility and the flexibility of the program were important factors for the Aboriginal nursing students. The prospect of obtaining

summer employment was also a favourable factor in their assessment of their NAPN experience. Thus, in this particular group of students, their perception was that NAPN was effective in meeting their needs.

Students found the turnover of NAPN staff to be a problem as it had a tendency to limit their access to a student advisor. Issues related to the non-Aboriginal student advisors were also mentioned, and these were related to matters of trust, and concerns relating to the perception that the non-Aboriginal student advisors lacked understanding about Aboriginal culture, history and lifestyle. Some students expressed trepidation about restricting the staff to all-Aboriginal, and questioned whether this would be the best solution.

Concerns expressed by the Aboriginal nursing students tended to concentrate on issues of culture and difference. These are factors over which NAPN has little control but which could adversely affect the retention rate of Aboriginal students in the nursing program. In order to address these issues, concerted and collective efforts must be made by NAPN and NEPS to assist nursing education to become more inclusive. This could entail activities such as increasing the cultural content of the nursing curriculum, increasing the number of Aboriginal faculty, increasing the cross-cultural education of faculty and staff, making use of Aboriginal community resources, and continuing to promote an Aboriginal presence at SIAST and at the University of Saskatchewan.

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Native Access Program to Nursing  
C/o College of Nursing  
107 Wiggins Road  
University of Saskatchewan  
Saskatoon, SK S7N 5E5

November 6, 2002

Dear Sandy:

Re: Proposal for NAPN Student Satisfaction Study

This letter is to acknowledge your proposal for research on student satisfaction with the Native Access Program to Nursing (N.A.P.N.).

The Native Access Program to Nursing supports your research and will facilitate any meetings or distribution material required to ensure appropriate student participation.

N.A.P.N. staff look forward to a working with you.

Sincerely,

A handwritten signature in black ink, appearing to read "Val Arnault".

Val Arnault,  
Aboriginal Nursing Advisor



**UNIVERSITY OF SASKATCHEWAN  
BEHAVIOURAL RESEARCH ETHICS BOARD**

<http://www.usask.ca/research/ethics.shtml>

**NAME:** Linda Ferguson, College of Nursing  
Sandra Brown

**BSC#:** 02-473

**CO-INVESTIGATOR:** Gail Laing

**DATE:** May 9, 2002

The University Advisory Committee on Ethics in Behavioural Science Research has reviewed the Application for Ethics Approval for your study "The Experiences of Aboriginal Nursing Students of the Nursing Education Program of Saskatchewan with the Native Access Program" (02-473).

1. Your study has been APPROVED subject to the following minor modifications:
  - Please modify your consent form/ information letter as follows:
    - a. State the purpose of the study
    - b. Describe the questions that you plan to ask.
    - c. Indicate that participants may choose not to answer individual questions.
    - d. Indicate that the results of the study may be published and presented at conferences.
2. Please send one copy of your revisions to the Office of Research Services for our records. Please highlight or underline any changes made when resubmitting.
3. The term of this approval is for 5 years.
4. This letter serves as your certificate of approval, effective as of the time that you have completed the requested modifications. If you require a letter of unconditional approval, please so indicate on your reply, and one will be issued to you.
5. Any significant changes to your proposed study should be reported to the Chair for Committee consideration in advance of its implementation.





6. This approval is valid for five years on the condition that a status report form is submitted annually to the Chair of the Committee. This certificate will automatically be invalidated if a status report form is not received within one month of the anniversary date. Please refer to the website for further instructions: <http://www.usask.ca/research/ethics.shtml>

I wish you a successful and informative study.

A handwritten signature in black ink, which appears to read "V. Thompson", is written over a horizontal line.

Dr. Valerie Thompson, Chair  
Behavioural Research Ethics Board

VT/cc



November 19<sup>th</sup>, 2002

Sandra Brown  
#11 – 285 Fairford Street East  
Moose Jaw, SK  
S6H OE1

Dear Sandra:

The Research Committee, College of Nursing has reviewed your application to contact all self-identified Aboriginal students who have recently graduated and currently registered in the Nursing Education Program of Saskatchewan (NEPS). The title of your study is *The Experience of Aboriginal Nursing Students of the Nursing Education Program of Saskatchewan with the Native Access Program to Nursing (NAPN)*.

Your study has been APPROVED to access Aboriginal Nursing Students subject.

The reviewers had some useful suggestions that will be helpful to you in conducting your research. Since the Information Letter was not included with your application, it is unclear whether you will be contacting the potential participants or encouraging them to contact you. I am assuming that this is clearly described in the letter. Dr. Muriel Montbriand has agreed to share her review with you as it contains helpful suggestions on the 'words' used in a phenomenology approach. It is also suggested that if another person, besides the researcher, is to read the transcripts then this person should not have any affiliation with the College of Nursing.

The original copy of this letter and Dr. Montbriand's review will be left in my pick-up mail box in room 442 Ellis Hall. If you would prefer to have these mailed to you, please let me know. My office number is 966-8239 and home number is 668-1866.

I wish you a successful and informative study.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "Dorothy Forbes".

Dorothy Forbes, RN, Ph.D.  
Chair  
Research Committee

c.c. Dean Horsburgh, Marlene Smadu, M. Montriand, R. Roberts, G. Laing, D. Quest,  
L. Ferguson, V. Arnault

**SIAST****SASKATCHEWAN INSTITUTE OF  
APPLIED SCIENCE AND TECHNOLOGY****SIAST Kelsey Campus**  
PO Box 1520  
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Phone: (306) 933-6350  
Fax: (306) 933-6490

November 14, 2002

Indra E. Brown  
- 285 Fairford Street East  
Dunlop, SK S6H 0E1

Dear Sandra:

I am pleased to grant permission for your request to communicate with the nursing students regarding their contact with the Native Access Program to Nursing. This communication would be conducted according to the terms described in the Consent to be Research Participant which you appended to your October 17, 2002 letter. It is my understanding that your research project and the consent form have been approved by the University of Saskatchewan Advisory Committee on Ethics in Behavioral Science Research.

Wish you every success in your research in this important area, and I look forward to receiving a copy of your thesis.

Sincerely,

Sandra Davidson Dick  
Dean of Nursing

# 11- 285 Fairford Street East,  
Moose Jaw, Saskatchewan  
S6H 0E1  
January 20, 2003

To:

Hi. This letter is to introduce myself and also to ask for your assistance. I am an RN, who is working on her Masters in Nursing at the University of Saskatchewan in Saskatoon.

I am looking at the Native Access Program to Nursing. Val Arnault and the NAPN staff have been looking at the possibility of having an evaluation done of the program. I propose to speak to those students who are aware of the program and who may have used it in order to assess the services and access to NAPN.

This 'study' will assist myself by allowing me to complete the requirements for my degree in nursing and it will also provide NAPN with some data regarding their program.

Please find attached an Information Sheet for Prospective Participants of this 'study'.

I will be making a follow-up phone call in the next 2 weeks to see if you had time to look at this information and if you are interested in participating.

Thank you very much,

Sandy Brown

## **Information Sheet for Prospective Participants: The Experiences of the Aboriginal Nursing Students of the Nursing Education Program of Saskatchewan with the Native Access Program to Nursing**

Sandra Brown is a graduate student who is completing the Master's in Nursing Program at the University of Saskatchewan. She is conducting a study with Aboriginal nursing students or recent graduates who may have utilized the services of the Native Access Program to Nursing. The purpose of the study is to examine the perceptions of Aboriginal nursing students regarding the services of and access to NAPN. Sandra is not on faculty at the University and she is not employed by NAPN.

You are invited to participate in this study. The feedback you give may help improve or change the services offered by the Native Access Program to Nursing.

Following are answers to questions you may have about the study.

### **1. How much time will it take?**

You will be asked to participate in an interview lasting approximately 1 hour, at a time of your convenience and a place of your choosing. All interviews (including phone follow-up interviews) will be tape-recorded. You will have a follow-up phone call or visit to clarify information given at the first interview and to sign the transcript release form. At this time, you will have an opportunity to review the transcript and make any changes you feel are appropriate. You will also have the opportunity to be involved in a discussion of the analysis, if you wish.

### **2. Who will be doing the research?**

Sandra Brown will conduct all the interviews and analyze all the information provided. The interview will be transcribed by a trusted secretary who will sign a confidentiality agreement. The objectives of the study include: to describe the experiences of Aboriginal students in the nursing program relevant to NAPN, to identify facilitators and barriers to completion of nursing education, to identify aspects of NAPN that were helpful and those that were least helpful, and to identify services that NAPN does not offer but that the students may perceive as necessary or useful. The questions that will be posed to you will focus on meeting those objectives.

### **3. Who will the participants be?**

I would like to speak to those Aboriginal nursing students or recent graduates from the Nursing Education Program of Saskatchewan, who are aware of or who have used the Native Access Program to Nursing during their nursing program.

#### **4. Are there any risks to participate?**

It is my hope that participants can freely discuss their experiences with NEPS and NAPN. In order to facilitate this discussion, I assure you that no one from NEPS or NAPN will have access to your interview tapes or transcripts (other than Linda Ferguson, Supervisor), and that all comments will be reported by code names. I will protect your anonymity.

#### **5. What good will the study do me?**

The study may not benefit you personally, but could contribute to the learning experiences of other students. You will have the opportunity to reflect and talk about your nursing education and any issues that may have helped or hindered you in your quest to complete the program.

#### **6. Who will have access to the stories that I will tell?**

You will be one of several nurses or nursing students interviewed for this project. Only the researcher will be aware of who you are. Your name will never be used and the information collected from you will remain confidential. Your comments will be ascribed a code name and the circumstances changed in order to protect your privacy. The final report and any publications or presentations of this data will contain code names only. the results of this study may be published or presented at conferences

#### **7. Can I change my mind?**

Yes. You may decide at any time to stop the interview or withdraw from the study. You may also choose not to answer any individual question. If you choose to withdraw, any information that you have provided will be removed from the analysis. NEPS and NAPN personnel will not know if you have participated in the study, or if you decide to withdraw.

#### **8. Who can I contact for more information?**

Please feel free to call at any time with any questions.

**Sandra Brown 260-6460 Prof. Linda Ferguson 966-6264**  
 #11-285 Fairford Street East Supervisor  
 Moose Jaw, Saskatchewan 343 Ellis Hall  
 S6H 0E1 College of Nursing  
 University of Saskatchewan

### **Consent to be a Research Participant**

#### **Project Title: The Experiences of Aboriginal Nursing Students of the Nursing Education Program of Saskatchewan with the Native Access Program to Nursing**

Sandra Brown is an Aboriginal nurse and a graduate student at the University of Saskatchewan who is interested in conducting a study exploring the effectiveness of the student services offered by the Native Access Program to Nursing.

**In signing the consent form, the participant acknowledges the following points:**

I consent to participate in a taped interview(s), to be scheduled at my convenience and in a location of my choosing. The interview will last approximately 1 hour. This interview will be transcribed. There will be follow-up phone call or meeting to allow me the opportunity to review the written transcript of the interview for accuracy. I understand that I may make changes to the transcript as appropriate.

I understand that I may choose not to discuss any particular issue or answer any individual question, and that I may withdraw from the study at any time without consequence. Any data collected if I withdraw, will not be utilized in the study and will be destroyed.

I understand that I may not benefit directly from my participation in the study. I also understand that this information will be written and published in the form of a report for a Master's theses. There is a possibility that some of the results of the study will be submitted for publication or in journal format or presented at educational conferences. My name or any identifying information will not be used in the report. My contribution to this study will be anonymous, and my privacy will be protected. At the completion of the study, any data collected, including tapes and transcripts will be stored at the University in a secure location for five years.

I have been given an information sheet and a copy of this consent to keep and have had the opportunity to ask Sandra Brown questions. I can telephone her at 260-6460 with any further questions at any time. Participants can also contact my supervisor, Professor Linda Ferguson at 966-6264, or the Office of Research Services at the University of Saskatchewan at 966-4053.

This proposed research project was reviewed and approved on ethical grounds by the University of Saskatchewan Advisory Committee on Ethics in Behavioral Science Research on May 9, 2002.

I agree to participate in this study.

---

Participant Date

---

Researcher

Sandra Brown 260-6460 Professor Linda Ferguson 966-6264  
Graduate Student College of Nursing

## **Information Sheet for Prospective Participants: The Experiences of the Aboriginal Nursing Students of the Nursing Education Program of Saskatchewan with the Native Access Program to Nursing**

Sandra Brown is a graduate student who is completing the Master's in Nursing Program at the University of Saskatchewan. She is conducting a study with Aboriginal nursing students or recent graduates who may have utilized the services of the Native Access Program to Nursing. The purpose of the study is to examine the perceptions of Aboriginal nursing students regarding the services of and access to NAPN. Sandra is not on faculty at the University and she is not employed by NAPN.

You are invited to participate in this study. The feedback you give may help improve or change the services offered by the Native Access Program to Nursing.

Following are answers to questions you may have about the study.

### **1. How much time will it take?**

You will be asked to participate in an interview lasting approximately 1 hour, at a time of your convenience and a place of your choosing. All interviews (including phone follow-up interviews) will be tape-recorded. You will have a follow-up phone call or visit to clarify information given at the first interview and to sign the transcript release form. At this time, you will have an opportunity to review the transcript and make any changes you feel are appropriate. You will also have the opportunity to be involved in a discussion of the analysis, if you wish.

### **2. Who will be doing the research?**

Sandra Brown will conduct all the interviews and analyze all the information provided. The interview will be transcribed by a trusted secretary who will sign a confidentiality agreement. The objectives of the study include: to describe the experiences of Aboriginal students in the nursing program relevant to NAPN, to identify facilitators and barriers to completion of nursing education, to identify aspects of NAPN that were helpful and those that were least helpful, and to identify services that NAPN does not offer but that the students may perceive as necessary or useful. The questions that will be posed to you will focus on meeting those objectives.

### **3. Who will the participants be?**

I would like to speak to those Aboriginal nursing students or recent graduates from the Nursing Education Program of Saskatchewan, who are aware of or who have used the Native Access Program to Nursing during their nursing program.



### Transcript Release Form

I, \_\_\_\_\_, have reviewed the transcript of my personal interview conducted for this study, and have had the opportunity to add, change or remove information from the transcript as appropriate. I acknowledge that the transcript accurately reflects what I said in my personal interview with Sandra Brown. I hereby authorize the release of this transcript to Sandra Brown to be used in the manner described in the consent form. I have received a copy of this document for my own records.

\_\_\_\_\_  
Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Researcher

\_\_\_\_\_  
Date

**Demographic Sheet**

Name: \_\_\_\_\_ I.D.# \_\_\_\_\_

Home Address: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Saskatoon Phone: \_\_\_\_\_

**a) Background**

Age: 18 - 30 \_\_\_\_\_ 30 - 40 \_\_\_\_\_ 40 - 50 \_\_\_\_\_ 50 + \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Aboriginal status: \_\_\_\_\_

Band: \_\_\_\_\_ Languages  
spoken: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Dependents: \_\_\_\_\_

-Ages of dependents: \_\_\_\_\_

**b) Educational background**

-High School preparation: \_\_\_\_\_

-Previous post-secondary education: \_\_\_\_\_

**c) Nursing background**

Date of graduation (anticipated) from nursing: \_\_\_\_\_

Year in Program: \_\_\_\_\_

Year of Entry: \_\_\_\_\_

**c) Interview Times**

Preferred time and place for interview

\_\_\_\_\_

